

Kansas Register

Bill Graves, Secretary of State

Vol. 10, No. 11

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State Banking Board

Notice of Meeting

The State Banking Board will meet at 9:30 a.m. Monday, April 15, in the conference room of the State Banking Department, Suite 300, 700 S.W. Jackson, Topeka. The board reviews matters relating to its supervisory authority set forth in K.S.A. 9-1801 *et seq*.

W. Newton Male State Bank Commissioner

Doc. No. 010350

Doc. No. 010342

State of Kansas

Kansas Planning Council on Developmental Disabilities Services

Notice of Meeting

The Kansas Planning Council on Developmental Disabilities Services will meet at 9 a.m. Thursday, March 21, at the Maner Conference Centre, Kansas Expocentre, One Expocentre Drive, Topeka.

John F. Kelly Executive Director

State of Kansas

Attorney General

Opinion No. 91-16

Mentally III, Incapacitated and Dependent Persons; Social Welfare—Physically Disabled Persons—Use of Support Dogs by Physically Disabled Persons. Ted D. Ayres, General Counsel, Kansas Board of Regents, Topeka, March 1, 1991.

The term "physical disability" as it is used in the physically disabled persons act is to be interpreted to encompass any physical disability. Verification of training and certification of a support dog may be obtained only from the training and certifying organization or individual. The University of Kansas campus at Lawrence may be considered one "public facility" as that term is used in the physically disabled persons act. The Kansas Board of Regents may not request or require a physically disabled person to contact a particular campus office before that person enters university buildings with a support dog. Cited herein: K.S.A. 39-1101; K.S.A. 1990 Supp. 39-1102; K.S.A. 39-1107; K.S.A. 1990 Supp. 39-1108. CN

Robert T. Stephan Attorney General

Doc. No. 010346

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Bill Graves
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(913) 296-2236



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Department of Administration

Public Notice

Under requirements of K.S.A. 65-34,117(b), as amended by 1990 Senate Bill No. 554, records of the Division of Accounts and Reports show the unobligated balance in the petroleum storage tank release trust fund is \$5,065,939.97 as of February 28, 1991.

> Arthur H. Griggs Acting Secretary of Administration

Doc. No. 010335

State of Kansas

Real Estate Commission

Notice of Hearing on Proposed Administrative Regulations

A public hearing will be conducted at 10 a.m. Tuesday, April 16, in Room 108 of the Landon State Office Building, 900 S.W. Jackson, Topeka, to consider the adoption of a proposed amendment to regulation 86-1-5.

This 30-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on the proposed rule and regulation. All interested parties may submit written comments prior to the hearing to the Kansas Real Estate Commission, Room 501, Landon State Office Building, 900 S.W. Jackson, Topeka 66612-1220. All interested parties will be given a reasonable opportunity to present their views orally on the adoption of the proposed regulation during the hearing. In order to give all parties an opportunity to present their views, it may be necessary to request each participant to limit any oral presentation to five minutes.

This regulation is proposed for adoption on a permanent basis. A summary of the proposed regulation and its economic impact follows.

K.A.R. 86-1-5. The regulation increases fees for original salespersons licenses and renewal of salespersons licenses to \$30 (based on annual amount) and increases fees for original brokers licenses and renewal of bro-

kers licenses to \$50 (based on annual amount).

The economic impact on real estate salespersons is \$10 for a two-year period and \$20 for brokers for a two-year period. Anticipated revenue to the commission is \$76,560 and \$19,140 to the general fund during fiscal year 1992. There is no significant economic impact to other state agencies, employees or the general public.

Copies of the regulation and its economic impact statement may be obtained from the Kansas Real Estate Commission at the address above, (913) 296-3411.

> E. W. Yockers Director

State of Kansas

Social and Rehabilitation Services

Request for Proposals

Kansas Rehabilitation Services is requesting proposals for the establishment and operation of independent living centers. Priority will be given to funding projects that meet the state's definition of an independent living center. The projects must provide services in the following Kansas counties: Atchison, Coffey, Geary, Jackson, Jefferson, Morris, Osage, Pottawatomie, Riley and Wabaunsee.

Independent living program funds are available for three projects for one year. A total of \$42,500 is available to fund services in Osage and Coffey counties. A total not to exceed \$45,126 is available to fund services in Atchison, Jackson and Jefferson counties. A total not to exceed \$40,000 is available for funding a project for services in Riley, Pottawatomie, Geary, Morris and Wabaunsee counties. The closing date for receipt of proposals is May 1.

To obtain a request for proposal and grant application packet contact Melba Gwaltney at (913) 296-3911

or TDD (913) 296-7029.

Stephen Schiffelbein Kansas Rehabilitation Services

Doc. No. 010343

State of Kansas

Board of Education

Notice of Available Federal Funding for Adult Basic Education

Pursuant to assurances as set out in the current Kansas State Plan for Adult Basic Education, notification of available federal funding for this program is announced. These funds are authorized by Section 322

of the Adult Education Act, as amended.

The Adult Education Act provides federal financial assistance to states to expand educational opportunities for adults and to encourage the establishment of adult education programs that will enable all adults to acquire basic literacy skills necessary to function in society, enable adults to continue their education to at least the level of completion of secondary school, and make available to adults a means to secure training and education that will enable them to become more employable, productive and responsible citizens. The state will fund local programs of education based on need and resources available. Applications will be accepted until May 10.

For further information and applications contact Janet Durflinger, Adult Education Specialist, Kansas State Department of Education, 120 E. 10th, Topeka

66612, (913) 296-3192.

Dr. Lee Droegemueller Commissioner of Education

Doc. No. 010344

Doc. No. 010341

Department of Administration Division of Architectural Services

Notice of Commencement of Negotiations for Engineering Services

Notice is hereby given of the commencement of negotiations for engineering services to develop a longrange exterior lighting plan for the University of Kansas Medical Center, Kansas City, Kansas. Any questions or expressions of interest should be directed to Gerald R. Carter, AIA, Deputy Director of Planning and Project Management, Division of Architectural Services, 625 Polk, Topeka 66603, (913) 233-9367, on or before March 29. An original and four copies of the SF 255 form (plus attachments as required) should be submitted with letters of interest.

Edward A. Martin, AIA Director, Division of Architectural Services

Doc. No. 010334

State of Kansas

Legislature

Legislative Bills Introduced

The following numbers and titles of bills and resolutions have been recently introduced by the 1991 Kansas Legislature. Copies of bills and resolutions are available free of charge from the Legislative Document Room, 145-N, State Capitol, Topeka 66612, (913) 296-4096.

Bills Introduced February 28-March 6:

House Bills

HB 2541, by Committee on Federal and State Affairs: An act amending the Kansas act against discrimination; concerning certain procedures relating to enforcement thereof; relating to discrimination because of disability or familial status; prohibiting certain acts and providing penalties for violations; amending K.S.A. 44-1001, 44-1002, 44-1006, 44-1009, 44-1015, 44-1017, 44-1011, 44-1018, 44-1020, 44-1021, 44-1022, 44-1026, 44-1027 and 44-1030 and K.S.A. 1990 Supp. 44-1005 and 44-1019 and repealing the existing sections.

HB 2542, by Committee on Federal and State Affairs: An act concerning children, youth and families; providing for the establishment of a governor's commission and local commissions on children, youth and families; providing for development, implementation and coordination of plans and programs relating to children, youth and families.

HB 2543, by Committee on Taxation: An act relating to property taxation; exempting levies from aggregate levy limits to replace revenue loss from intangibles tax removal; amending K.S.A. 79-5020 and K.S.A. 1990 Supp. 12-1,101 and repealing the existing sections.

HB 2544, by Committee on Taxation: An act relating to property taxation; limiting the authority of cities and counties to grant exemptions therefrom.

HB 2545, by Committee on Taxation: An act relating to property taxation; concerning exemptions therefrom and payments in lieu thereof for property purchased or constructed from proceeds of certain revenue bonds; amending K.S.A. 79-201a and K.S.A. 1990 Supp. 12-1742 and repealing the existing sections.

HB 2546, by Committee on Taxation: An act relating to taxes upon the gross earnings derived from money, notes and other evidence of debt; authorizing the levying of such taxes by school districts; providing for informational returns to be filed by certain persons and providing penalties for violations; amending K.S.A. 12-1,105 and

12-1,106 and K.S.A. 1990 Supp. 12-1,101, 12-1,104, 12-1,107 and 12-1,108 and repealing the existing sections.

HB 2547, by Committee on Federal and State Affairs: An act enacting the mobile home parks residential landlord and tenant act.

HB 2548, by Committee on Appropriations: An act concerning the workers compensation fund; relating to financing the fund; amending K.S.A. 1989 Supp. 44-566a, as amended by section 6 of chapter 350 of the 1990 Session Laws of Kansas, and repealing the existing section; also repealing K.S.A. 1990 Supp. 44-566a.

HB 2549, by Committee on Federal and State Affairs: An act authorizing cities to levy sales taxes for crime prevention efforts.

HB 2550, by Committee on Federal and State Affairs: An act concerning penalties for violations of the uniform controlled substances act; amending K.S.A. 1990 Supp. 65-4127a, 65-4127b and 65-4159 and repealing the existing sections; also repealing K.S.A. 1990 Supp. 65-4127e, 65-4127f and 65-4127g.

HB 2551, Committee on Federal and State Affairs: An act amending the Kansas juvenile offenders code; relating to disposition; amending K.S.A. 1990 Supp. 38-1663 and repealing the existing sec-

tion; also repealing K.S.A. 1990 Supp. 38-1663b.

HB 2552, by Committee on Federal and State Affairs: An act concerning alcoholic liquor; relating to brand registration and price posting; amending K.S.A. 1990 Supp. 41-331 and 41-1101 and repealing the existing sections.

HB 2553, by Committee on Federal and State Affairs: An act concerning crimes and punishments; authorizing revocation of a defendant's driving privileges upon conviction of a crime; amending K.S.A. 1990 Supp. 8-254 and 21-4603 and repealing the existing sections.

HB 2554, by Committee on Federal and State Affairs: An act amending the Kansas civil service act; relating to dismissals, demotions and suspensions of employees in the classified service; amending K.S.A. 75-2949 and repealing the existing section.

amending K.S.A. 75-2949 and repealing the existing section.

HB 2555, by Committee on Federal and State Affairs: An act establishing local children's authorities pilot studies for providing children's services; granting certain powers to and imposing certain duties upon the secretary of social and rehabilitation services; establishing the child welfare fund; providing for contracting with local children's authorities; establishing the state children's authority and providing for the powers, duties and functions thereof.

HB 2556, by Committee on Federal and State Affairs: An act concerning certain violations of the uniform controlled substances act; amending K.S.A. 1990 Supp. 65-4127a and 65-4127b and repealing the existing sections; also repealing K.S.A. 1990 Supp. 65-4127f and 65-4127g.

HB 2557, by Committee on Appropriations: An act concerning motor vehicles; relating to inspection of vehicle identification numbers; amending K.S.A. 1990 Supp. 8-116a and repealing the existing section.

HB 2558, by Committee on Federal and State Affairs: An act concerning municipal housing authorities; relating to housing rentals and tenant admissions; amending K.S.A. 17-2347 and repealing the existing section.

House Concurrent Resolutions

HCR 5015, by Representatives Neufeld, et al: A concurrent resolution urging Congress to propose, for ratification by the states, a U.S. constitutional amendment authorizing Congress and the states to prohibit desecration of the United States Flag.

House Resolutions

HR 6035, by Representative Minor: A resolution congratulating and commending the Kinsley-Offerle Middle School eighth grade class for winning first place in the Kansas Commission on the Bicentennial of the United States Constitution workbook contest.

HR 6036, by Representative Amos, et al.: A resolution in memory of Donald C. Amrein.

HR 6037, by Representative Crumbaker: A resolution congratulating and commending the Hoxie High School wrestling team and Coach Roger Morris for winning the 1990-91 Class 3-2-1A State Wrestling Championship in Kansas.

HR 6038, by Representative Solbach: A resolution congratulating and commending the National Conference of Commissioners on Uniform State Laws on its forthcoming 100th anniversary.

HR 6039, by Representatives Thompson, Blumenthal, Hackler, Macy and Sader: A resolution in memory of Ray Miller.

Senate Bills

SB 363, by Committee on Ways and Means: An act concerning the uniform consumer credit code; loan finance charges for certain

SB 364, by Committee on Ways and Means: An act concerning the state correctional institutions; effecting certain consolidations and name changes; affecting definitions and conforming statutory references; amending K.S.A. 1990 Supp. 21-4602, 21-4603, 21-4605, 21-4620, 75-3765, 75-4503, 75-5202, 75-5209, 75-5211, 75-5218, 75-5220, 75-5262, 75-5263, 75-5264, 75-5265, 75-5266, 75-52,116, 75-52,131 and 75-52,134 and repealing the existing sections; also repealing K.S.A. 1990 Supp. 75-52,116a.

SB 365, by Committee on Federal and State Affairs: An act concerning insurance; relating to purchase thereof by the Kansas bureau of investigation; amending K.S.A. 75-4109 and repealing the existing

SB 366, by Committee on Federal and State Affairs: An act concerning the Kansas parimutuel racing act; relating to investigations of violations of such act and rules and regulations adopted thereunder; amending K.S.A. 1990 Supp. 74-8807 and repealing the ex-

SB 367, by Committee on Federal and State Affairs: An act concerning the Kansas parimutuel racing act; relating to disclosure of certain information; amending K.S.A. 1990 Supp. 74-8804 and re-

pealing the existing section.

SB 368, by Committee on Federal and State Affairs: An act concerning the uniform commercial code; requiring the usage of federal employee identification numbers or social security numbers in certain filings; amending K.S.A. 84-9-402 and 84-9-404 and K.S.A. 1990 Supp. 84-9-403, 84-9-405, 84-9-406 and 84-9-407 and repealing the existing sections.

SB 369, by Committee on Ways and Means: An act concerning imprest funds of correctional institutions and facilities of the department of corrections; amending K.S.A. 1990 Supp. 75-3058 and

repealing the existing section.

SB 370, by Committee on Federal and State Affairs: An act concerning charitable trusts; amending K.S.A. 1990 Supp. 59-22a01 and

repealing the existing section.

SB 371, by Committee on Ways and Means: An act concerning the uniform commercial code; relating to negotiable instruments; amending K.S.A. 84-1-207, 84-2-511, 84-4-101, 84-4-102, 84-4-103, 84-4-104, 84-4-105, 84-4-106, 84-4-107, 84-4-108, 84-4-201, 84-4-202, 84-4-203, 84-4-204, 84-4-205, 84-4-206, 84-4-208, 84-4-209, 84-4-210, 84-4-211, 84-4-212, 84-4-213, 84-4-214, 84-4-301, 84-4-302, 84-4-303, 84-4-401, 84-4-402, 84-4-403, 84-4-405, 84-4-406, 84-4-407, 84-4-501, 84-4-502, 84-4-503 and 84-4-504 and K.S.A. 1990 Supp. 84-1-201 and repealing the existing sections; also repealing K.S.A. 84-3-101 through 84-3-122, 84-3-201 through 84-3-208, 84-3-301 through 84-3-307, 84-3-401 through 84-3-419, 84-3-501 through 84-3-511, 84-3-601 through 84-3-606, 84-3-701, 84-3-801 through 84-3-805, 84-4-109 and 84-4-207.

Senate Concurrent Resolutions

SCR 1620: A concurrent resolution urging school districts to protect the confidentiality of personnel evaluation documents and requesting the performance of duties related thereto by the State Department of Education and other school related associations.

Senate Resolutions

SR 1827, by Senator Frahm: A resolution congratulating and commending the Hoxie High School wrestling team and Coach Roger Morris for winning the 1990-91 3-2-1A State Wrestling Championship in Kansas.

SR 1828, by Senator Ehrlich: A resolution congratulating and commending the Community of Alden, Kansas, on its designation as a Kansas Pacemaker community from the Kansas PRIDE Program.

SR 1829, by Senator Brady: A resolution congratulating and commending the Parsons High School debate team on winning the Class 4-A State Debate Championship.

Doc. No. 010348

State of Kansas

State Fair Board

Notice of Meeting

The State Fair Board will meet at 7 a.m. Thursday, March 21, at the State Board of Agriculture offices, 901 S. Kansas Ave., Topeka. For further information, contact Deana Novak at (316) 662-6611.

> Deana K. Novak Administrative Officer

Doc. No. 010339

State of Kansas

Kansas Inc.

Notice of Meeting

The Kansas Inc. board will meet from 9 a.m. to noon Thursday, March 21, in the Kansas Inc. conference room, Suite 113, 400 S.W. 8th, Topeka. The meeting is open to the public.

> Charles R. Warren President

Doc. No. 10345

State of Kansas

Department of Health and Environment

Notice Concerning Kansas Water Pollution Control Permits

In accordance with state regulations 28-16-57 through 28-16-63 and the authority vested with the state by the administrator of the U.S. Environmental Protection Agency, tentative permits have been prepared for discharges to the waters of the United States and the state of Kansas for the applicants described below. The tentative determinations for permit content are based on preliminary limitations of the state of Kansas and the EPA, and when issued will result in a state water pollution control permit and national pollutant discharge elimination system authorization to discharge subject to certain effluent limitations and special conditions.

Name and Address of Applicant City of Almena Box 277 Almena, KS 67622

Waterway Prairie Dog Creek

Type of Discharge Secondary wastewater treatment facility

Norton County, Kansas

Kansas Permit No. M-UR01-0001

Fed. Permit No. KS-0116769

Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address of Applicant Roy Baker Quarry, Inc. Box 100 Valley Falls, KS 66088

Waterway Kansas River via Delaware River via Brush Creek, Kansas River Basin

Type of Discharge Mine pit dewatering discharge

(continued)

Jefferson County, Kansas

Kansas Permit No. I-KS73-P002

Fed. Permit No. KS-0085871

Description of Facility: This facility is engaged in a limestone crushing operation with washing. All wastewater from the washing operation is clarified in a settling pond and then recycled. The only discharge is the dewatering of two quarry pits. This is a new facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f).

Name and Address of Applicant	TATALAmmunam	Type of
or Applicant	Waterway	Discharge
City of Bushton	Cow Creek via	Secondary
217 S. Main	Plum Creek	wastewater
P.O. Box 194		treatment
Bushton, KS 67427		facility
Rice County, Kansas	*	<i>idemity</i>

Kansas Permit No. M-AR15-0001 Fed. Permit No. KS-0022250
Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address		Type of
of Applicant	Waterway	Discharge
City of Geneseo	Little Arkansas	Secondary
P.O. Box 507	River via unnamed	wastewater
Geneseo, KS 67444	tributary	treatment
•	•	facility

Rice County, Kansas

Kansas Permit No. M-LA04-0001 Fed. Permit No. KS-0024813

Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address of Applicant	Waterway	Type of Discharge
City of Lincoln Center 153 W. Lincoln P.O. Box 126	Saline River via Yauger Creek	Secondary wastewater treatment
Lincoln County, Kansas		facility

Kansas Permit No. M-SA07-0001 Fed. Permit No. KS-0028240

Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards.

domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

	of Applicant	Waterway	Type of Discharge
	City of McCracken	Smoky Hill	Secondary
/	City Hall	River via	wastewater
	McCracken, KS 67556	Big Timber Creek	treatment facility

Rush County, Kansas

Kansas Permit No. M-SH26-0001 Fed. Permit No. KS-0116988

Description of Facility: This facility is designed for the treatment of

domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address of Applicant	Waterway	Type of Discharge
Meadow Acres Mobile Home Park	Big Creek	Secondary wastewater
P.O. Box 596		treatment
Hays, KS 67601		facility
Ellis County, Kansas		

Kansas Permit No. C-SH16-0002 Fed. Permit No. KS-0119822

Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address of Applicant	Waterway	Type of Discharge
City of Medicine Lodge City Hall	Medicine Lodge River via Elm	Secondary wastewater
114 W. 1st Medicine Lodge, KS 67104 Barber County, Kansas	Creek	treatment facility

Kansas Permit No. M-AR60-0001 Fed. Permit No. KS-0116858
Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address of Applicant	Waterway	Type of Discharge
City of Rush Center Box 125	Walnut Creek	Secondary wastewater
Rush Center, KS 67575		treatment

Rush County, Kansas

Kansas Permit No. M-UA36-0001 Fed. Permit No. KS-0117102

Description of Facility: This facility is designed for the treatment of domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Name and Address of Applicant	Waterway		e of charge
City of Victoria	North fork of		ondary
City Hall	Big Creek		tewater
1005 4th St.		411 5.4	tment
P.O. Box 87		facil	
Victoria, KS 67671	and the second second		
Ellis County, Kansas	et jar		

Kansas Permit No. M-SH37-0001 Fed. Permit No. KS-0022721

Description of Facility: This facility is designed for the treatment of

domestic sewage. This is an existing facility. Proposed effluent limitations are pursuant to Kansas Surface Water Quality Standards, K.A.R. 28-16-28(b-f), and are technology based.

Written comments on the proposed determinations may be submitted to Bethel Spotts, Permit Clerk, Kansas Department of Health and Environment, Division of Environment, Bureau of Water, Forbes Field, Topeka 66620. All comments received prior to April 12 will be considered in the formulation of final determinations regarding this public notice. Please refer to the appropriate application number (KS-91-40/49) and the name of applicant as listed when preparing comments.

If no objections are received, the Secretary of Health and Environment will issue the final determinations. If response to this notice indicates significant public interest, a public hearing may be held in conformance with state regulation 28-16-61. Media coordination (newspapers, radio) for publication and/or announcement of the public notice or public hearing is handled by the Kansas Department of Health and Environment.

The application, proposed permit, including proposed effluent limitations and special conditions, fact sheets as appropriate, comments received, and other information are on file and may be inspected at the Division of Environment offices from 8 a.m. to 4:30 p.m. Monday through Friday. The documents are available upon request at the copying cost assessed by KDHE. Additional copies of this public notice also may be obtained at the Division of Environment.

Stanley C. Grant Acting Secretary of Health and Environment

Doc. No. 010349

State Employees Health Care Commission

Notice of Meeting

The Kansas State Employees Health Care Commission will meet at 9 a.m. Thursday, March 28, in the Docking State Office Building's cafeteria, Room A, 915 S.W. Harrison, Topeka.

Arthur H. Griggs Acting Chairman

Doc. No. 010333

State of Kansas

Department of Administration Division of Purchases

Notice to Bidders

Sealed bids for the purchase of the following items will be received by the Director of Purchases, Landon State Office Building, 900 S.W. Jackson, Room 102, Topeka, until 2 p.m. C.S.T. on the date indicated and then will be publicly opened. Interested bidders may call (913) 296-2377 for additional information.

Monday, March 25, 1991

26417

Statewide—3M microfilm supplies

27443

Statewide—Flexible disks

27558

Department of Transportation—Asphaltic materials, various locations

87250

Department of Transportation—Breakaway base, Wichita

87280

Hutchinson Correctional Facility and Ellsworth Correctional Facility—Recreation equipment

Tuesday, March 26, 1991

28431

Department of Wildlife and Parks—Dirt moving and excavating service, Hillsdale wildlife area 87265

Norton Correctional Facility—Ready-mix concrete 87332

Kansas State University—Grain

Wednesday, March 27, 1991

A-6603

Department of Corrections—Boiler No. 2 safety modifications, Lansing

28426

Kansas Correctional Industries—Fabrication of stainless steel seats

87284

Department of Transportation—Fuel tanks, Salina

Thursday, March 28, 1991

A-6456 (Rev.)

Youth Center at Atchison—Intercom system
A-6594

Kansas State University—Strong Complex parking lot

27474

University of Kansas Medical Center—May (1991) meat products

27524

University of Kansas—May (1991) meat products 87249

Kansas State University—Radio/pager project 87295

Pittsburg State University—ID cards

87298

University of Kansas—Recycled paper

87306

Department of Human Resources—Plain paper photocopier

87318

Kansas Board of Agriculture-GIS workstation

Friday, March 29, 1991

A-6597

Adjutant General's Department—Partial reroof of federal warehouse

27583-A

Statewide—Spark plugs—automotive, outdoor, farm and industrial

87317

Kansas State University—Truck 87328

Department of Human Resources—Pressure seal system

87329

Department of Transportation—Wood signposts, Norton

87330

Pittsburg State University—Coordinate measuring system 87331

Department of Human Resources—K-Ben 23 warrants

Monday, April 1, 1991

27608

Kansas State University—Liquid helium (bulk purchase)

University of Kansas—Color graphics workstation

Kansas College of Technology-Lawn equipment

Wednesday, April 3, 1991

A-6184(a)

Pittsburg State University—Whitesitt Hall, remodeling for technology lab

Department of Corrections—Property insurance, El Dorado

Thursday, April 4, 1991

A-6442 (Rev.)

Topeka State Hospital—Fire alarm upgrade

Monday, April 15, 1991

28430

Department of Wildlife and Parks—Hay lease, Clinton State Park

> Nicholas B. Roach Director of Purchases

Doc. No. 010351

Board of Indigents' Defense Services

Notice of Meeting

The State Board of Indigents' Defense Services will meet at 1:30 p.m. Friday, March 22, in Room 108, Landon State Office Building, 900 S.W. Jackson,

For additional information, contact Ron Miles, Director, State Board of Indigents' Defense Services, Room 506, 900 S.W. Jackson, Topeka 66612, (913) 296-

4505.

Ronald E. Miles Director

Doc. No. 010347

State of Kansas

Secretary of State

Notice of Corporations Forfeited

In accordance with K.S.A. 17-7510, the articles of incorporation of the following corporations organized under the laws of Kansas and the authority of the following foreign corporations authorized to do business in Kansas were forfeited February 15, 1991, for failure to timely file an annual report and pay the annual franchise tax as required by the Kansas general corporation code:

Domestic Corporations

AAA Parachute Rides, Inc., Overland Park, KS. Aaron's Enterprises, Inc., Mission, KS. Air Capital Conditioned Water, Inc., Wichita, KS. Aksarben, Inc., Satanta, KS. The All Tax Corporation, Lenexa, KS. American Business Clubs, Wichita, KS, Inc., Wichita, KS.

Araserve of Kansas, Inc., Philadelphia, PA. Ashland Chamber of Commerce, Inc., Ashland, KS. Auto Image, Inc., Merriam, KS. Aviation Sales International, Inc., Wichita, KS. Banner Farm, Inc., Salina, KS. BDR Farms, Inc., Belleville, KS. Beneda Cattle Company, Inc., Castle Rock, CO. Beth Sholom Congregation, Topeka, KS.

Bluestem Yacht Club, Inc., Emporia, KS. Body Cover, Inc., Wichita, KS.

Career Images Model and Talent Agency, Inc.,

Kansas City, KS.

Carpet Gallery, Inc., Garden City, KS.

Central Investment Corporation, Kansas City, KS. Centrex Audio Visual Systems, Inc., Topeka, KS. Chicago Street Investments, Ltd., Salina, KS.

Coffeyville Boys Counsel, Incorporated,

Coffeyville, KS.

Crazyhorse Leather, Inc., Dodge City, KS. Cross Cultural Studies Program, Inc., Topeka, KS. Crown Consulting Services, Inc., DeSoto, KS. Custimized Cleaning Services, Inc., Wichita, KS D.W., Inc. (A Close Corporation), Manhattan, KS. Deloy, Inc., Atchison, KS. Eagle Mountain Resources, Inc., Hoisington, KS.

Eck Chiropractic Services, P.A., Mulvane, KS. Elder Lakeside Gardens, Inc., Baldwin City, KS. Emmanuel Pentecostal Temple, Inc., Wichita, KS. Englewood Corporation, Wichita, KS. Enright Machinery Company, Inc., Kansas City, MO. Enslinger Enterprises, Inc., Wichita, KS. Families Together, Inc., Topeka, KS. Family Finance of Kansas, Inc., Wichita, KS. Farmers & Builders Lumber Company, Inc., Zenda, KS. Fiddlesticks, Inc., Shawnee, KS. Finney's Construction, Inc., Wichita, KS. First Southern Baptist Church of Treece, Treece, KS. Fitness Plus, Inc., Kansas City, KS. Foxborough Homes Association, Inc., Olathe, KS. Gateway Plastics, Inc., Edgerton, KS. George Page Company, Inc., Wichita, KS. Golden Age Insurance and Investments, Inc., Lenexa, KS. Gordon's Shoe Center, Inc., Lawrence, KS. Grabills, Inc., Paola, KS. Greater Midwest Enterprises, Inc., Corpus Christi, TX. H.E. Miller & Sons Construction, Inc., Kansas City, KS. Hiawatha Jaycees, Inc., Hiawatha, KS. Holloways, Inc., Wichita, KS. Indian Valley Elementary School PTA, Inc., Overland Park, KS. J. Hoover, Inc., Leawood, KS. John Taylor Homes, Inc., Overland Park, KS. Jones Marketing Company, Inc., Overland Park, KS. Kansas Central Railway Company, Hutchinson, KS. Kansas City Lions Baseball Club, Overland Park, KS. Kansas Field Trial Club Association, Atlanta, KS. Kansas Woman's Relief Corps Auxiliary to the Grand Aray of the Republic, Arkansas City, KS. Kasual Kids of Oak Park, Inc., Overland Park, KS. Kay Enterprises, Inc., Topeka, KS. K.C. Custom Curb, Inc., Olathe, KS. Kelly and Son Roofing Inc., Kansas City, KS. Kelly's Kustom and Klassic Kars, Inc., Benton, KS. Kemp Sugar Co., Goodland, KS. Kismet, Inc., Shawnee, KS. Kitchen Design, Inc., Hutchinson, KS. Knight Enterprises, Ltd., Kansas City, MO. Knights of Columbus Building Association, Topeka, KS. Lansing, Kansas Scholarship Fund, Inc., Leavenworth, KS. Lawrence Congregation of Jehovah's Witnesses, Inc., Lawrence, KS Leavenworth Area Jaycees, Inc., Leavenworth, KS. Linwood Recreation Association, Inc., Linwood, KS. Long Line, Inc., Mission, KS. Lowry and Associates, Inc., Bucyrus, KS. Lyons Area Jaycees Inc., Lyons, KS.

Machinery Maintenance, Inc., Parsons, KS.

Marketing Professionals International, Inc.,

McCarty Memorials Co., Hutchinson, KS.

Wichita, KS.

Mechanical Contractors Association of Kansas, Inc., Topeka, KS.

Mid-American Cellular Telephone Company, Springfield, MO.

Miss Emporia Scholarship Pageant Association, Emporia, KS.

Monarch Apartments, L.P., Topeka, KS.

Morning Star, Inc., Nashville, TN.

Mr. Cinnamon of Kansas, Inc., Wichita, KS.

Needle Nest, Inc., Wakarusa, KS.

Nereidas Co., Kansas City, KS

Nichols, Inc., Parsons, KŚ. Nu Chapter of Sigma Nu, Prairie Village, KS.

Oaks Petroleum, Inc., Stoystown, PA.

Optics of Kansas City, Inc., Des Moines, IA.

Orchard Park Lake Estates Homeowners Association, Inc., Wichita, KS.

Owen Printed Circuits, Inc., Wichita, KS.

P & A Auto Parts, Inc., Tonganoxie, KS.

Perkins Realty, Incorporated, Mission, KS.

Prairie Lumber & Supply Company, Inc.,

Hutchinson, KS.

Prairie Pups Motorcycle Club, Hutchinson, KS.

Prairiefest, Inc., Hutchinson, KS.

Professional Career Development of Kansas, Inc.,

Clayton, MO.

Professional Residential Inspections, Inc.,

Overland Park, KS.

Professional Sales Associates, Ltd.,

Independence, KS.

Rebekah's Inc., Ellinwood, KS.

Redemption Managers of Kansas Co., Inc., A

Kansas Close Corporation, Overland Park, KS. Reilly Cattle Company, Inc., Bonner Springs, KS.

Reno County Cooperative Association,

Hutchinson, KS.

Resource and Development Enterprises,

Incorporated, Wichita, KS.

Rhodes Agri-Sales and Service, Inc., Solomon, KS.

RJR Associates, Inc., Kansas City, MO.

Roehr Company, Inc., Shawnee, KS.

Rosalia United Methodist Church, Inc., Leon, KS.

SAI, Inc., Stanley, KS.

Secqure Marine Systems, Incorporated,

Overland Park, KS.

Shepherd and Shepherd, Inc., Wichita, KS.

Shirts Illustrated of Lawrence Inc., Lawrence, KS.

Solartech Energy and Research Corporation,

Lecompton, KS.

Solution Systems, Inc., Topeka, KS.

Spinifex Marketing, Inc., Wichita, KS.

Sun-Beam Products, Inc., Wichita, KS.

T & S Pets, Inc., Wichita, KS.

The Colwich Jaycees, Inc., Wichita, KS.

The First Church of God at Fort Scott, Kansas, Inc.,

Fort Scott, KS.

The Hairetage, Inc., Wichita, KS.

The Volen Group, Inc., Shawnee, KS.

The Woods Condominium Homeowners Association,

Inc., Topeka, KS

TMC, Inc., Gardner, KS.

Tri-County Commodities, Inc., Sublette, KS.

Tri-Energy, Inc., Shawnee Mission, KS.

Wenpe Insurance Agency, Inc., Marysville, KS. Western Medical Services, Inc., Liberal, KS. Wichita Trade School, Inc., Wichita, KS. Wila-Tre Farms, Inc., Rose Hill, KS. Woods Lumber and Hardware, Inc., Parsons, KS. Z Restaurant Productions, Inc., Topeka, KS. 7385 Westbrooke, Inc., Lenexa, KS.

Foreign Corporations

A & J Electric Company, Kansas City, MO. ABC-Treadoo, Inc., Fort Smith, AR. Bales-Lang Electric Co., Lee's Summit; MO. B. J. Oil Company, Edina, MN. Cabre Exploration Inc., Calgary, Alberta, Canada. Chiro Systems, Inc., Overland Park, KS. Civil Engineers Inc., Oklahoma City, OK. Coffee Plus, Inc., Merriam, KS. Costain Coal Holdings, Inc., Evansville, IN. Duz-Mor Incorporated, Des Moines, IA. Elegant Eeel Etcetera, Ltd., Atlanta, GA. Encore Retirement Centers, Inc., White Plains, NY. Evco National, Inc., East Alton, IL. Heetco, Inc., Lewistown, MO. Henco, Incorporated, Selmer, TN. Herbert Oil Company, Fort Worth, TX. Heritage Care Centers, Kansas City, MO. J.C. Oil & Gas Company, Edina, MN. King Louie Bowling Corporation, Atlanta, GA. Koerkenmeier Construction, Inc., Tipton, MO. Lion Oil Company, El Dorado, AR. LJ Holding Co., Wichita, KS. LJ-II, Inc., Overland Park, KS. Lobar, Inc., Fort Collins, CO. Marilyn Steinberg Enterprises, Inc., Philadelphia, PA. Metropolitan Mortgage Company, Denver, CO. Miscellco Communications, Inc., Jackson, MS. Money Concepts International, Inc., N. Palm Beach, FL. National Construction Services, Inc., Plano, TX. Ocona, Inc., Denver, CO. Sasnak, A Limited Partnership, Tulsa, OK. Stanley Plumbing And Heating Company, Joplin, MO. Sturgis Newport Group, Inc., Hampton, VA. The Millgard Corporation, Livonia, MI.

The Perkin-Elmer Corporation, Norwalk, CT.

Windsor Asset Management, Inc., Escondido, CA.

W.G. Jaques Company, Des Moines, IA.

Wichita Trade School, Inc., Wichita, KS.

Bill Graves Secretary of State

Doc. No. 010338

Kansas State University

Notice to Bidders

Sealed bids for items listed below will be received by the Kansas State University Purchasing Office, Manhattan, until 2 p.m. local time on the date indicated and then will be publicly opened. Interested bidders may call (913) 532-6214 for additional information.

Monday, March 25, 1991 #10135

Truck cab and chassis 21,000# G.V.W.

William H. Sesler Director of Purchasing

Doc. No. 010336

(Published in the Kansas Register, March 14, 1991.)

Summary Notice of Bond Sale City of Deerfield Kearny County, Kansas \$315,000

General Obligation Storm Sewer Bonds Series 1991

(general obligation bonds payable from unlimited ad valorem taxes)

Sealed Bids

Subject to the official notice of bond sale and preliminary informational statement dated February 27, 1991, sealed bids will be received by the city of Deerfield, Kearny County, Kansas, at its office, City Hall, P.O. Box 281, Deerfield, KS 67838, until 7:30 p.m. C.S.T. on April 2, 1991, for the purchase of \$315,000 principal amount of General Obligation Storm Sewer Bonds, Series 1991. The city council will take action on the bids at a regular meeting of the city council at 7:30 p.m. C.S.T. on April 2, 1991. No bid of less than the entire par value of the bonds and accrued interest thereon to the date of delivery will be considered.

Bond Details

The bonds will consist of fully registered bonds each in the denomination of \$5,000 or any integral multiple thereof. The bonds will be dated April 1, 1991, and will become due serially on October 1 in the years as follows:

	to the second second second	. `
Maturity October 1		Amount
1992		\$ 5,000
1993		\$10,000
1994		\$10,000
1995		\$15,000
1996	* * * * * * * * * * * * * * * * * * *	\$15,000
1997		\$15,000
1998		\$15,000
1999		\$15,000
2000		\$15,000
2001		\$15,000
2002		\$15,000
2003	•	\$15,000
2004		\$15,000
2005		\$20,000

2006	•		\$20,000
2007		* * * * * * * * * * * * * * * * * * * *	\$20,000
2008			\$20,000
2009			\$20,000
2010			\$20,000
2011		1 1 A	\$20,000

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold as hereinafter provided, which interest will be payable semiannually on April 1 and October 1 in each year, beginning on April 1, 1992.

Paying Agent and Bond Registrar

Kansas State Treasurer, Topeka, Kansas.

Good Faith Deposit

Each bid shall be accompanied by a cashier's or certified check drawn on a bank located in the United States of America in the amount of \$6,300 (2 percent of the principal amount of the bonds).

Delivery

The city will pay for printing the bonds and will deliver the same properly prepared, executed and registered without cost to the successful bidder on or before May 15, 1991, at such bank or trust company in the state of Kansas or Kansas City, Missouri, as may be specified by the successful bidder.

Assessed Valuation and Indebtedness

The equalized assessed tangible valuation for computation of bonded debt limitations for the year 1991 is \$1,327,762, of which amount the sum of \$22,347 represents the assessed, taxable tangible value of motor vehicles. The total general obligation indebtedness of the city as of the date of the bonds, including the bonds being sold, is \$333,000.

Redemption of Bonds Prior to Maturity

Bonds maturing on October 1, 2002, and thereafter shall be subject to call and redemption by the city on October 1, 2001, and on any interest payment date thereafter upon the terms and conditions set forth in the bond resolution.

Approval of Bonds

The bonds will be sold subject to the legal opinion of Fred W. Rausch, Jr., Topeka, Kansas, bond counsel, whose approving legal opinion as to the validity of the bonds will be furnished and paid for by the city, printed on the bonds and delivered to the successful bidder as and when the bonds are delivered.

Bonds Not to be Rated

The bonds will not be rated by Standard & Poor's Corporation or Moody's Investors Service, Inc., or any other bond rating agency. If available, CUSIP numbers will be assigned to said bonds.

Additional Information

Additional information regarding the bonds may be obtained from the city at (316) 426-7411, or from the city's bond counsel, Fred W. Rausch, Jr., Suite 201, 220 S.W. 33rd, Topeka, KS 66611, (913) 267-3470.

Dated February 27, 1991.

City of Deerfield Kearny County, Kansas

Doc. No. 010274

(Published in the Kansas Register, March 14, 1991.)

CORRECTED

Summary Notice of Bond Sale Unified School District 260 Sedgwick County, Kansas \$5,000,000 General Obligation Bonds

General Obligation Bonds Series 1991

(general obligation bonds payable from unlimited ad valorem taxes)

Sealed Bids

Subject to the notice of bond sale and preliminary official statement dated February 19, 1991, sealed bids will be received by the clerk of Unified School District 260, Sedgwick County, Kansas (the issuer), on behalf of the governing body at the Administration Center, 120 E. Washington, Derby, until 4 p.m. C.S.T. on March 18, 1991, for the purchase of \$5,000,000 principal amount of General Obligation Bonds, Series 1991. No bid of less than the entire par value of the bonds and accrued interest thereon to the date of delivery will be considered.

Bond Details

The bonds will consist of fully registered bonds in the denomination of \$5,000 or any integral multiple thereof. The bonds will be dated April 1, 1991, and will become due on October 1 in the years as follows:

	Principal
	Amount
	\$ 20,000
	40,000
	65,000
	100,000
·.	130,000
	165,000
	210,000
	240,000
	275,000
	310,000
and the second s	345,000
	390,000
	435,000
	485,000
	535,000
	595,000
	660,000

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold as hereinafter provided, which interest will be payable semiannually on April 1 and October 1 in each year, beginning on October 1, 1992.

Paying Agent and Bond Registrar

Kansas State Treasurer, Topeka, Kansas.

Good Faith Deposit

Each bid shall be accompanied by a cashier's or certified check drawn on a bank located in the United States of America in the amount of \$100,000 (2 percent of the principal amount of the bonds).

Delivery

The issuer will pay for printing the bonds and will

deliver the same properly prepared, executed and registered without cost to the successful bidder on or before April 10, 1991, at such bank or trust company in the contiguous United States of America as may be specified by the successful bidder.

Assessed Valuation and Indebtedness

The equalized assessed tangible valuation for computation of bonded debt limitations for the year 1990 is \$139,470,458. The total general obligation indebtedness of the issuer as of the date of the bonds, including the bonds being sold, is \$11,575,000.

Approval of Bonds

The bonds will be sold subject to the legal opinion of Stinson, Mag & Fizzell, Wichita, Kansas, bond counsel, whose approving legal opinion as to the validity of the bonds will be furnished and paid for by the issuer, printed on the bonds and delivered to the successful bidder as and when the bonds are delivered.

Additional Information

Additional information regarding the bonds may be obtained from the clerk, Peggy Bieberle, (316) 788-8400; or from the financial advisor, Ranson Capital Corporation, 120 S. Market, Suite 450, Wichita, KS 67202, Attention: Stephen E. Shogren, (316) 262-4955.

Dated February 25, 1991.

Unified School District 260 Sedgwick County, Kansas

Doc. No. 010324

State of Kansas

Social and Rehabilitation Services

Temporary Administrative Regulations

Article 5.—PROVIDER PARTICIPATION, SCOPE OF SERVICES, AND REIMBURSEMENTS FOR THE MEDICAID (MEDICAL ASSISTANCE) PROGRAM

30-5-58. Definitions. (a) The following words and terms, when used in this part, shall have the following meanings, unless the context clearly indicates otherwise:

(1) "Accept medicare assignment" means accept the medicare allowed payment rate as payment in full for

services provided to a recipient.

(2) "Accrual basis accounting" means reporting revenue in the period when it is earned, regardless of when it is collected, and reporting expenses in the period in which they are incurred, regardless of when they are paid.

(3) "Acquisition cost" means the allowable reimbursement price determined by the agency for each covered drug, supply or device in accordance with

federal regulations.

(4) "Activities of daily living" means basic activities

necessary for daily self care.

(5) "Admission" means the condition of entry into a hospital for the purpose of receiving inpatient medical treatment.

(continued)

- (6) "Ambulance" means a state-licensed vehicle equipped for emergency transportation of injured or sick recipients to facilities where medical services are rendered.
- (7) "Arm's length transaction" means a transaction between unrelated parties.
- (8) "Border cities" mean those communities outside of the state of Kansas but within a 50-mile range of the state border.
- (9) "Case conference" means a scheduled face-to-face meeting involving two or more persons to discuss problems associated with the treatment of the facility's patient or patients. Persons involved in the case conference may include treatment staff, collaterals or other agency representatives of the client or clients.

(10) "Capitation reimbursement" means a reimbursement methodology establishing payment rates, per program recipient or eligible individual, for a designated appropriate the company of appropriate the company of

nated group of services.

(11) "Change of ownership" means:

(A) A change that involves an arm's length trans-

action between unrelated parties; and

(B)(i) The dissolution or creation of a partnership when no member of the dissolved partnership or the new partnership retains ownership interest from the previous ownership affiliation;

(ii) a transfer of title and property to another party if the transfer is an arm's length transaction, and if

the property is owned by a sole proprietor;

(iii) the change or creation of a new lessee, acting

as a provider of pharmacy services; or

- (iv) the consolidation of two or more corporations that creates a new corporate entity. However, the transfer of participating provider corporate stock shall not in itself constitute a change of ownership. Similarly, a merger of one or more corporations with a participating provider corporation surviving shall not constitute a change of ownership.
- (12) "Common control" means that an individual or organization has the power, directly or indirectly, to significantly influence or direct the actions or policies of an organization or facility.
- (13) "Common ownership" means that an individual or individuals possess significant ownership or equity in the provider and the facility or organization serving the provider.

(14) "Comparable outpatient service" means a service that is provided in a hospital that is comparable to a service provided in a physician's office or ambulatory

surgical center.

(15) "Comparison per diem rate" means the per diem rate as adjusted by deducting the teaching cost for approved intern, resident and nursing programs divided by the total hospital inpatient days in the hospital fiscal year ending in 1981.

(16) "Concurrent care" means services rendered si-

multanously by two or more eligible providers.

(17) "Consultation" means an evaluation which requires another examination by a provider of the same profession, a study of records, and a discussion of the case with the physician primarily responsible for the patient's care.

- (18) "Contract loss" means the excess of contract cost over contract income.
- (19) "Cost finding" means the process of recasting the date derived from the accounts ordinarily kept by a provider to ascertain costs of the various types of services rendered.
- (20) "Cost outlier" means a general hospital inpatient stay with an estimated cost which exceeds the cost outlier limit established for the respective diagnosis related group.

related group.
(21) "Cost outlier limit" means the maximum cost of a general hospital inpatient stay established according to a methodology specified by the secretary for

each diagnosis related group.

(22) "Cost-related reimbursement" means reimbursement based on analysis and consideration of the historical operating costs required to provide specified services.

(23) "Covered service" means a medical service for which reimbursement will be made by the medicaid/medikan program. The agency may limit coverage on the basis of prior authorization.

(24) "Day outlier" means a general hospital inpatient length of stay which exceeds the day outlier limit established for the respective diagnosis related group.

(25) "Day outlier limit" means the maximum general hospital inpatient length of stay established according to a methodology specified by the secretary for each diagnosis related group.

(26) "Diagnosis related group (DRG)" means the classification system which arranges medical diagnoses

into mutally exclusive groups.

- (27) "Diagnosis related group (DRG) adjustment percent" means a percentage assigned by the secretary to a diagnosis related group for purposes of computing reimbursement.
- (28) "Diagnosis related group (DRG) daily rate" means the dollar amount assigned by the secretary to a diagnosis related group for purposes of computing reimbursement when a rate per day is required.
- (29) "Diagnosis related group (DRG) reimbursement system" means a reimbursement system in the Kansas medicaid/medikan program for general hospital inpatient services which uses diagnosis related groups for determining reimbursement on a prospective basis.

(30) "Diagnosis related group (DRG) weight" means the numeric value assigned to a diagnosis related group for purposes of computing reimbursement.

(31) "Discharge" means the condition of release from a hospital. A discharge shall occur when the recipient leaves the hospital or dies. A transfer to another unit within a hospital, except to a swing bed, and a transfer to another general or special hospital shall not be a discharge.

(32) "Discharging hospital" means, in instances of the transfer of a recipient, the hospital which discharges the recipient admitted from the last transfer-

ring hospital.

(33) "Disproportionate share hospital" means a hos-

pital that has:

(A) A medicaid/medikan inpatient utilization rate of at least one standard deviation above the mean medicaid/medikan inpatient utilization rate for hospitals within the state borders of Kansas which are receiving medicaid/medikan payments or a hospital with a low-

income utilization rate exceeding 25%; and

(B) at least two obstetricians with staff privileges at the hospital who have agreed to provide obstetric services to medicaid/medikan eligible individuals. In a hospital located in a rural area, the obstetrician may be any physician with staff privileges at the hospital to perform non-emergency obstetric procedures. The only exceptions to this shall be:

(i) A hospital with inpatients who are predominantly

under 18 years of age; or

(ii) a hospital which did not offer non-emergency obstetric services as of December 21, 1987.

(34) "Drug, supply or device" means:

(A) Articles recognized in the official United States pharmacopoeia, or other such official compendiums of the United States, or official national formulary, or any supplement of any of them;

(B) articles intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in hu-

man beings;

(C) articles intended to affect the structure or any

function of the bodies of human beings; and

(D) articles intended for use as components of any articles specified in clause (A), (B) or (C) of this paragraph.

(35) "Durable medical equipment (DME)" means

equipment which will:

(A) Withstand repeated use;

(B) not generally be useful to a person in the absence of an illness or injury;

(C) be primarily and customarily used to serve a

medical purpose;

(D) be appropriate for use in the home; and

(E) be rented or purchased as determined by desig-

nees of the secretary.

- (36) "Election period" means the period of time for the receipt of hospice care, beginning with the first day of hospice care as provided in the election statement and continuing through any subsequent days excluding any days of hospice care earlier than the date the election statement is signed.
- (37) "Election statement" means the revokable statement signed by a recipient which is filed with a particular hospice and which consists of:

(A) Identification of the hospice selected to provide

care;

(B) acknowledgement that the recipient has been

given a full explanation of hospice care;

(C) acknowledgement by the recipient that other medicaid services are waived;

(D) effective date of the election period; and

(E) the recipient's signature or the signature of the

recipient's legal representative.

(38) "Emergency services" means those services provided after the sudden onset of a medical condition manifested by symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably by expected to result in placing the patient's health in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.

(39) "Estimated cost" means the cost of general hospital inpatient services provided to a recipient which are computed using a methodology set out in the Kansas medicaid state plan.

(40) "Formulary" means a listing of drugs, supplies

or devices.

(41) "Free-standing inpatient psychiatric facility" means an inpatient psychiatric facility licensed to pro-

vide services only to the mentally ill.

(42) "General hospital" means an establishment with an organized medical staff of physicians, with permanent facilities that include inpatient beds, with medical services, including physician services and continuous registered professional nursing services for not less than 24 hours of every day, and which provides diagnosis and treatment for nonrelated patients who have a variety of medical conditions.

(43) "General hospital group" means the category to which a general hospital is assigned for purposes of

computing reimbursement.

(44) "General hospital inpatient beds" mean the number of beds as reported by the general hospital on the hospital and hospital health care complex cost report form excluding those beds designated as skilled nursing facility or intermediate care facility beds. For hospitals not filing the hospital and hospital health care complex cost report form, the number of beds shall be obtained from the provider application for participation in the Kansas medicaid/medikan program form.

(45) "Group reimbursement rate" means the dollar value assigned by the secretary to each general hospital group for a diagnosis related group weight of one.

(46) "Health maintenance organization" means an organization of providers of designated medical services which makes available and provides these medical services to eligible enrolled individuals for a fixed periodic payment which is determined in advance. Referral to outside specialists is limited.

(47) "Historical cost" means actual allowable costs

incurred for a specified period of time.

(48) "Home health aide service" means the direct care provided by a person with minimum training, and who is under the supervision of a registered nurse employed by a home health agency, to recipients who are unable to care for themselves or who need assistance in accomplishing the activities of daily living.

(49) "Hospice" means a public agency or private organization, or a subdivision of either, that primarily engages in providing care to terminally ill individuals, which meets the medicare conditions of participation for hospices, and which has enrolled to provide hospice services pursuant to K.A.R. 30-5-59.

(50) "Hospital located in a rural area" means a facility located in an area outside of a metropolitan statistical area as defined by the executive office of management and budget under the health care fi-

nancing administration.

(51) "Independent laboratory" means a laboratory that performs laboratory tests that are ordered by a physician, and that is in a location other than the physician's office or a hospital.

(52) "Ineligible provider" means a provider who is

(continued)

not enrolled in the medicaid/medikan program because of reasons set forth in K.A.R. 30-5-60, or because of commission of civil or criminal fraud in another state or another program.

(53) "Interest expense" means the cost incurred for the use of borrowed funds on a loan made for a pur-

pose related to patient care.

(54) "Kan Be Healthy program participant" means an individual under the age of 21 who is eligible for medicaid, and who has undergone a Kan Be Healthy medical screening in accordance with a specified screening schedule in order to ascertain physical and mental defects and to provide treatment which corrects or ameliorates defects and chronic conditions found.

(55) "Kan Be Healthy dental-only participant" means an individual under the age of 21 who is eligible for medicaid, and who has undergone only a Kan Be Healthy dental screening in accordance with a specified screening schedule in order to ascertain dental defects and to provide treatment which corrects or ameliorates dental defects and chronic dental conditions found.

(56) "Kan Be Healthy vision-only participant" means an individual under the age of 21 who is eligible for medicaid, and who has undergone only a Kan Be Healthy vision screening in accordance with a specified screening schedule in order to ascertain vision defects and to provide treatment which corrects or ameliorates vision defects and chronic vision conditions found.

(57) "Length of stay as an inpatient in a general hospital" means the number of days an individual remains for treatment as an inpatient in a general hospital from and including the day of admission, to and

excluding the day of discharge.

(58) "Lock-in" means the restriction of a recipient's access to medical services because of abuse through limitation of the use of the medical identification card

to designated medical providers.

(59) "Low-income utilization rate for hospitals" means the rate which is defined in accordance with the omnibus budget reconciliation act, public law 100-203, Section 4112, effective July 1, 1988, which is

adopted by reference.

(60) "Managerial capacity" means an individual, including a general manager, business manager, administrator, or director, who exercises operational or managerial control over the provider, or who directly or indirectly conducts the day to day operations of the provider.

(61) "Maternity center" means a facility licensed as a maternity hospital which provides delivery services

for normal uncomplicated pregnancies.

(62) "Medicaid/medikan hospital inpatient utilization rate" means the total number of medicaid/medikan paid inpatient days in a cost reporting period, divided by the total number of the hospital's inpatient days in

the same period.

(63) "Medical necessity" means a medically necessary item or service prescribed or provided by a physician or other medical practitioner for a specific medical condition and for the purpose of achieving a specific result. Medical staff designated by the secretary have final authority for the determination of medical necessity.

(64) "Medical necessity in psychiatric situations" means that there is medical documentation which indicates that the person could be harmful to himself or herself or others if not under psychiatric treatment, or the person is disoriented in time, place or person.

(65) "Medical supplies" means supplies not generally useful to a person in the absence of illness or injury which are prescribed by a physician and used in the

home and certain institutional settings.

(66) "Metropolitan statistical area (MSA)" means a geographic area designated as such by the United States executive office of management and budget as set out in the Federal Register, Vol. 53, No. 244, December 20, 1988, which is adopted by reference.

(67) "Necessary interest" means interest expense incurred on a loan made to satisfy a financial need of the facility. Loans which result in excess funds or investments shall not be considered necessary.

(68) "Net cost" means the cost of approved educational activities less any reimbursements from grants,

tuition, and specific donations.

(69) "Non-covered services" mean services for which medicaid/medikan will not provide reimbursement, including services that have been denied due to the lack of medical necessity.

(70) "Occupational therapy" means the provision of treatment by an occupational therapist registered with the American occupational therapy association. The

treatment shall be:

(A) Rehabilitative and restorative in nature;

(B) provided following physical debilitation due to acute physical trauma or physical illness; and

- (C) prescribed by the attending physician. (71) "Orthotics and prosthetics" mean devices which
- (A) Reasonable and necessary for treatment of an illness or injury;

(B) prescribed by a physician;

(C) necessary to replace or improve functioning of a body part; and

(D) provided by a trained orthotist or prosthetist.

- (72) "Out-of-state provider" means any provider that is physically located more than 50 miles beyond the border of Kansas, except those providing services to children who are wards of the secretary. Nursing facilities, intermediate care facilities, community mental health centers, partial hospitalization service providers, and alcohol and drug program providers shall be considered out-of-state providers if they are physically located beyond the border of Kansas.
- (73) "Outpatient treatment" means services provided by the outpatient department of a hospital, a facility that is not under the administration of the hospital, or a physician's office.

(74) "Over-the-counter" means any item available for

purchase without a prescription order.

(75) "Owner" means a sole proprietor, member of a partnership or a corporate stockholder with 5% or more interest in the corporation. The term "owner" shall not include minor stockholders in publicly-held corporations.

(76) "Partial hospitalization program" means an ambulatory treatment program that includes the major diagnostic, medical, psychiatric, psychosocial, and daily living skills treatment modalities based upon a treatment plan.

(77) "Participating provider" means any individual or entity that has in effect an agreement with the Kansas department of social and rehabilitation services to furnish medicaid services.

(78) "Pharmacy" means the premises, laboratory,

area or other place:

(A) Where drugs are offered for sale, the profession of pharmacy is practiced and prescriptions are com-

pounded and dispensed;

(B) which has displayed upon it or within it the words "pharmacist," "pharmaceutical chemist," "pharmacy," "apothecary," "drugstore," "druggist," "drugs," "drug sundries," or any combinations of these words or words of similar import; and

(C) where the characteristic symbols of pharmacy or the characteristic prescription sign "Rx" is exhibited. The term "premises" as used in this subsection refers only to the portion of any building or structure leased, used, or controlled by the registrant in the conduct of the business registered by the board at the address for which the registration was issued.

(79) "Pharmacist" means any person duly licensed or registered to practice pharmacy by the state board of pharmacy or by the regulatory authority of the state in which the person is engaged in the practice of

pharmacy.

(80) "Physical therapy" means treatment which:

(A) Is provided by a physical therapist registered in the jurisdiction where the service is provided or by the Kansas board of healing arts;

(B) is rehabilitative and restorative in nature;

(C) is provided following physical debilitation due to acute physical trauma or physical illness; and

(D) is prescribed by the attending physician.

(81) "Physician extender" means a person registered as a physician's assistant or licensed advanced registered nurse practitioner in the jurisdiction where the service is provided and who is working under supervision as required by law or administrative regulation.

(82) "Plan of care" means a document which states the need for care, the estimated length of program, the prescribed treatment, modalities, and methodology

to be used, and the expected results.

(83) "Practitioner" means any person licensed to practice medicine and surgery, dentistry or podiatry, or any other person licensed, registered or otherwise authorized by law to administer, prescribe and use prescription-only drugs in the course of professional practice.

(84) "Prescribed" means the issuance of a prescrip-

tion order by a practitioner.

(85) "Prescription" means, according to the context, either a prescription order or a prescription medication.

- (86) "Prescription medication" means any drug, supply or device, including label and container according to context, which is dispensed pursuant to a prescription order.
- (87) "Prescription-only" means an item available for purchase only with a prescription order.

(88) "Primary care network" means a service delivery

control system in which physicians, in independent or group practices, local health departments, or clinics act as primary care providers and are responsible for initiating or approving specified medical services for participating recipients.

(89) "Primary diagnosis" means the most significant

diagnosis related to the services rendered.

(90) "Prior authorization" means the approval of a request to provide a specific service before the provision of the service.

(91) "Professional fee" means the reimbursement rate assigned to each individual pharmacy provider for

provision of pharmacy services.

(92) "Program" means the Kansas medicaid/medikan

program.

(93) "Proper interest" means interest incurred at a rate not in excess of what a prudent borrower would have had to pay under market conditions existing at the time the loan was made.

(94) "Prospective, reasonable cost-related reimbursement" means present and future reimbursement, based on analysis and consideration of the historical cost that is related to patient care, in the operation of

facilities and programs.

(95) "Qualified medicare beneficiary (QMB)" means an individual who is entitled to medicare hospital insurance benefits under part A of medicare, whose income does not exceed a specified percent of the official poverty level as defined by the United States executive office of management and budget, and whose resources do not exceed twice the supplemental security income resource limit.

(96) "Readmission" means the subsequent admission of a recipient as an inpatient into a hospital within 30 days of discharge as an inpatient from the same or

another DRG hospital.

(97) "Related parties" means that one party of a transaction has the ability to significantly influence another party in the transaction to the extent that either of their own separate interests may not be fully pursued. Related parties include those related by family, by business or financial association, or by common ownership or control.

(98) "Related to the community mental health center" means that the agency or facility furnishing services to the community mental health center is directly associated or affiliated with the community mental health center by formal agreement, or that it governs the community mental health center, or is governed

by the community mental health center.

(99) "Residence for the payment of hospice services" means a hospice recipient's home or the nursing facility in which a hospice recipient is residing.

(100) "Revocation statement" means the statement signed by the recipient which revokes the election of

hospice service.

(101) "Special hospital" means an establishment with an organized medical staff of physicians, with permanent facilities that include inpatient beds, with medical services, including physician services and continuous registered professional nursing services for not less than 24 hours of every day, and which pro-

vides diagnosis and treatment for nonrelated patients who have specified medical conditions.

(102) "Speech therapy" means treatment provided by a speech pathologist who has a certificate of clinical competence from the American speech and hearing association. The treatment shall be rehabilitative and restorative in nature, shall be provided following physical debilitation due to acute physical trauma or physicial illness, and shall be prescribed by the attending physician.

(103) "Standard diagnosis related group (DRG) amount" means the amount computed by multiplying the group reimbursement rate for the general hospital

by the diagnosis related group weight.

(104) "Stay as an inpatient in a general hospital" means the period of time spent in a general hospital

from admission to discharge.

(105) "Swing bed" means a hospital bed that can be used interchangeably as either a hospital, skilled nursing facility, or intermediate care facility bed, with reimbursement based on the specific type of care provided.

(106) "Targeted case management services" means those services to assist medicaid recipients in gaining access to medically necessary care, and which are provided by a case manager with credentials specified by the department of social and rehabilitation services.

- (107) "Technology-assisted child" means a chronically ill or medically fragile child younger than 16 years whose illness or disability, in the absence of home care services, would require admission to or prolonged stay in a hospital. The technology-assisted child needs both a medical device to compensate for the loss of a vital body function and substantial continuous care by a nurse or other caretaker under the supervision of a nurse in order to avert death or further disability. A technology-assisted child shall require substantial and ongoing care by a nurse, and be dependent at least part of each day on mechanical ventilators for survival, require prolonged intravenous administration of nutritional substances or drugs, or require other medical devices to compensate for the loss of a vital body function.
- (108) "Terminally ill" means the medical condition of an individual whose life expectancy is six months
- or less as determined by a physician.

 (109) "Timely filing" means the receipt by the Kansas department of social and rehabilitation services or its fiscal agent of a claim for payment from a provider for services provided to a medicaid program recipient which is no later than six months after the date the claimed services were provided.

(110) "Transfer" means the movement of an individual receiving general hospital inpatient services from one hospital to another hospital for additional related inpatient care after admission to the previous

hospital or hospitals.

(111) "Transferring hospital" means the hospital which transfers a recipient to another hospital. There may be more than one transferring hospital for the same recipient until discharge.

(112) "Uncollectable overpayment to an out-of-busi-

ness provider" means:

(A) Any amount which is due from a provider of

medical services who has ceased all practice or operations for any medical services as an individual, a partnership or a corporate identity, and who has no assets capable of being applied to any extent toward a medicaid overpayment; or

(B) any amount due which is less than its collection

and processing costs.

(113) "Urgent" means situations which require immediate admission, but not through the emergency room.

- (b) The effective date of this regulation shall be March 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c; effective May 1, 1981; amended May 1, 1982; amended May 1, 1983; amended May 1, 1984; amended May 1, 1985; amended May 1, 1986; amended May 1, 1988; amended, T-30-7-29-88, July 29, 1988; amended Sept. 26, 1988; amended Jan. 2, 1989; amended July 1, 1989; amended, T-30-12-28-89, Jan. 1, 1990; amended Jan. 2, 1990; amended, T-30-2-28-90, Feb. 28, 1990; amended Aug. 1, 1990; amended Jan. 7, 1991; amended, T-30-3-1-91, March 1, 1991.)
- **30-5-77.** Scope of home- and community-based services for technology-assisted children. The scope of home- and community-based services for technology-assisted children shall consist of those services provided under the authority of a federally approved waiver. Home- and community-based services shall be provided in accordance with a written plan of care by a home health agency and approved by the Kansas Department of social and rehabilitation services. (a) Services may include one or more of the following:

(1) An average of 10 hours per month of case man-

agement services;

(2) a maximum of seven days or 168 hours per calendar year of respite care provided in the home; and

(3) medical equipment and supplies not otherwise covered under the medicaid program and approved in

the plan of care.

(b) Reimbursement for services for technology-assisted children shall be based upon reasonable fees as related to customary charges, except no fee shall be paid in excess of the range maximum. The range of charges shall provide the base for computations. The effective date of this regulation shall be March 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c; effective, T-30-3-1-91, March 1, 1991.)

Article 6.—MEDICAL ASSISTANCE PROGRAM— CLIENTS' ELIGIBILITY FOR PARTICIPATION

30-6-82. Technology-assisted child; determined eligibles. (a) Each applicant or recipient shall meet the general eligibility requirements of K.A.R. 30-6-50 and the requirements set forth below to be eligible as a technology-assisted child.

(1) Each child shall be under the age of 16.

(2) Each child shall, if not for the provision of homeand community-based services, require the level of care provided in a hospital.

(3) Each child shall require substantial and ongoing

care by a nurse and:

- (A) Be dependent at least part of each day on mechanical ventilators for survival;
- (B) require prolonged intravenous administration of nutritional substances or drugs; or

(C) need some other medical device to compensate for the loss of a vital bedy function.

(b) Eligibility shall be determined based on the financial eligibility standards and methodologies applicable to persons in home- and community-based

services arrangements.

(c) The need for care and receipt of home- and community-based services under this provision shall be subject to approval by the division of medical pro-

subject to approval by the division of medical programs. The effective date of this regulation shall be March 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-0708c; implementing K.S.A. 1990 Supp. 39-709; effective, T-30-3-1-91, March 1, 1991.)

30-6-106. General rules for consideration of resources, including real property, personal property, and income. (a) Legal title shall determine ownership for assistance purposes. In the absence of legal title, possession shall determine ownership.

(b) Resources, to be real, shall be of a nature that the value can be defined and measured. The objective measures set forth in paragraphs (1) and (2) below shall

establish the resources' value.

(1) Real property. The value of real property shall be initially determined by the latest uniform statewide appraisal value of the property which shall be adjusted to reflect current market value. If the property has not been appraised or if the market value as determined above is not satisfactory to the applicant or recipient or the agency, an estimate or appraisal of its value shall be obtained from a disinterested real estate broker. The cost of obtaining an estimate or appraisal shall be borne by the agency.

(2) Personal property. The market value of personal property shall be initially determined using a reputable trade publication. If a publication is not available, or if there is a difference of opinion regarding the value of the property between the agency and the individual, an estimate from a reputable dealer shall be used. The cost of obtaining an estimate or appraisal shall be borne

by the agency.

(c) (1) Resources shall be considered available both when actually available and when the applicant or recipient has the legal ability to make them available. A resource shall be considered unavailable when there is a legal impediment that precludes the disposal of the resource. The applicant or recipient shall pursue reasonable steps to overcome the legal impediment unless it is determined that the cost of pursuing legal action would be more than the applicant or recipient would gain or the likelihood of succeeding in the legal action would be unfavorable to the applicant or recipient.

(2) For the purpose of this subsection, a revocable or irrevocable trust shall be considered available to the applicant or recipient up to the maximum value of the funds which may be made available under the terms of the trust on behalf of the applicant or recipient if:

(A) The trust is established by the applicant, the recipient, the applicant or recipient's spouse, or the

applicant or recipient's guardian or legal representative, who is acting on the applicant or recipient's behalf;

(B) that applicant or recipient is a beneficiary; and (C) the trustees are permitted to exercise any discretion with respect to distribution to the applicant or

This provision shall not be applicable if the applicant or recipient is a mentally retarded individual who is residing in an intermediate care facility for the mentally retarded provided the trust was established prior to April 7, 1986 and is solely for the benefit of that ap-

plicant or recipient.

(3) For SSI, real property shall be considered unavailable for so long as it cannot be sold because:

(A) The property is jointly owned and its sale would cause undue hardship due to the loss of housing for the other owner or owners; or

(B) the owner's reasonable efforts to sell the prop-

erty have been unsuccessful.

(d) The resource value of property shall be that of the applicant's or recipient's equity in the property. Unless otherwise established, the proportionate share of jointly-owned real property and the full value of jointly-owned personal property shall be considered available to the applicant or recipient. Resources held jointly with a non-legally responsible person may be excluded from consideration if the applicant or recipient can demonstrate that the applicant or recipient has no ownership interest in the resource, has not contributed to the resource, and that any access to the resource by the applicant or recipient is limited to those duties performed while the applicant or recipient is acting as an agent for the other person.

(e) Nonexempt resources of all persons in the assistance plan and the nonexempt resources of persons who have been excluded from the assistance plan pursuant to K.A.R. 30-6-74(b) and K.A.R. 30-6-79(c) shall

be considered

(f) (1) The combined resources of husband and wife, if they are living together, shall be considered in determining eligibility of either or both for the medical assistance program, unless otherwise prohibited by law.

(2) A husband and wife shall be considered to be living together if they are regularly residing in the same household. Temporary absences of either the husband or the wife for education or training, working, securing medical treatment or visiting shall not be considered to interrupt the couple's living together.

(3) A husband and wife shall not be considered as living together when they are physically separated and not maintaining a common life, or when one or both enter into an institutional living arrangement, including either a medicaid-approved or non-approved medical facility or a home- and community-based services care arrangement. If only one spouse enters an institutional living arrangement, the provisions of subsection (m) below apply. If both spouses enter an institutional living arrangement, the combined resources of the husband and wife shall be considered available to both for the month in which the institutional arrangement begins.

(continued)

(g) The resources of an ineligible parent shall be considered in determining the eligibility of a minor child for the medical assistance program if the parent and child are living together, except that such resources shall not be considered for children in an institutional or home- and community-based services arrangement.

(h) When any individual in the household, who does not have the responsibility to support a person in the plan, voluntarily and regularly contributes cash to the recipient toward household expenses, including maintenance costs, the amount of the contribution to be counted shall be the net income realized by the

household.

(i) Despite subsections (e), (f), and (g) above, the resources of an SSI beneficiary shall not be considered in the determination of eligibility for medical assistance of any other person.

(j) The conversion of real and personal property from one form to another shall not be considered as income to the applicant or recipient except for the proceeds from a contract for the sale of property.

(k) Income shall not be considered both as income

and as property in the same month.

(l) Despite subsection (e) above, the resources of a child whose needs are met through foster care payments shall not be considered.

(m) When one spouse enters an institutional living arrangement and the other spouse remains in the community, and an application for medical assistance is made on behalf of the institutionalized spouse, the

following provisions apply:

- (1) The separate income of each spouse shall not be considered available to the other beginning in the month the institutional arrangement begins. Unless otherwise established, ½ of the income which is paid in the names of both spouses shall be considered available to each. Income which is paid in the name of either spouse, or in the name of both spouses and the name of another person or persons, shall be considered available to each spouse in proportion to the spouse's interest, unless otherwise established.
- (2) A monthly income allowance for the community spouse shall be deducted from the income of the institutionalized spouse in determining eligibility. The income allowance for the community spouse, when added to the income already available to that spouse, shall not exceed 122% of the official federal poverty income guideline for two persons plus the amount of any excess shelter allowance. The excess shelter allowance is defined as the amount by which the community spouse's expenses for rent or mortgage payments, taxes and insurance for the community spouse's principal residence plus the \$175.00 food stamp standard utility allowance exceeds 30% of the 122% federal poverty income guideline amount referred to above. The maximum income allowance which can be provided under this provision shall be \$1,662.00. The \$1,662.00 limitation shall be increased annually to reflect the percentage increase in the consumer price index for all urban consumers. If a greater income allowance is provided under a court order of support or through the

fair hearing process, that amount shall be used in place of the above limits.

(3) A monthly income allowance for each dependent family member shall also be deducted from the income of the insitutionalized spouse in determining eligibility. A dependent family member is defined as a minor or dependent child, dependent parent or dependent sibling of either spouse who lives with the community spouse. The allowance for each member shall be equal to 1/3 of 122% of the official federal poverty income guideline for two persons. An allowance shall not be provided if the family member's gross income is in excess of the 122% federal poverty income guideline for two persons.

(4) If the spouse is institutionalized on or after September 30, 1989, the real and personal property of both spouses shall be considered in determining the eligibility of the institutionalized spouse in the month of application based on the amount of property in excess of the community spouse property allowance as set forth in paragraph (m) (6) below. Following the month in which the institutionalized spouse is determined eligible, the property of each spouse shall not be con-

sidered available to the other.

(5) If the spouse was institutionalized before September 30, 1989, the real and personal property of each spouse shall be considered available to the other in the month in which the institutional arrangement began. Thereafter, the property of each spouse shall not be considered available to the other.

- (6) The institutionalized spouse may make available to the community spouse a property allowance which, when added to the property already available to the community spouse, would be equal to ½ of the total value of the property owned by both spouses as of the first period of continuous institutionalization beginning on or after September 30, 1989. This allowance may not exceed \$66,480.00, but shall be no less than \$13,296.00. Both the \$13,296.00 and \$66,480.00 standards shall be increased annually to reflect the percentage increase in the consumer price index for all urban consumers. If a greater property allowance is provided under a court order of support or through the fair hearing process, that amount shall be used in place of the above limits.
- (7) The amount of property received by the community spouse as a result of the property allowance determined in paragraph (m) (6) shall not be considered in determining the eligibility of the institutionalized spouse except as provided in paragraph (m)(4) above. If the institutionalized spouse will be eligible based upon transferring sufficient property to the community spouse to equal the amount of the property allowance, the institutionalized spouse shall be given up to 90 days from the date of application to transfer the property. Additional time may be allowed for good cause. Pending disposition of the property, the institutionalized spouse shall be deemed to be temporarily eligible during this time period if all other eligibility factors are met. The effective date of this regulation shall be March 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981;

amended May 1, 1982; amended May 1, 1983; amended May 1, 1984; amended, T-85-26, Oct. 15, 1984; amended May 1, 1985; amended May 1, 1986; amended May 1, 1986; amended, T-87-20, Sept. 1, 1986; amended May 1, 1986; amended, T-88-14, July 1, 1987; amended May 1, 1987; amended, T-88-59, Jan. 1, 1988; amended May 1, 1988; amended, T-89-13, April 26, 1988; amended, T-30-7-1-88, July 1, 1988; amended Sept. 26, 1988; amended July 1, 1989; amended Oct. 1, 1989; amended Jan. 2, 1990; amended April 1, 1990; amended T-30-10-1-90, Oct. 1, 1990; revoked, T-30-12-28-90, Jan. 2, 1991; amended Jan. 7, 1991; amended, T-30-12-28-90, Jan. 2, 1991; amended, T-30-3-1-91, March 1, 1991.)

Robert S. Harder Acting Secretary of Social and Rehabilitation Services

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State of Kansas

Social and Rehabilitation Services

Permanent Administrative Regulations

Article 4.—PUBLIC ASSISTANCE PROGRAM

30-4-111. Applicable income. (a) Applicable income shall be the amount of earned and unearned income to be subtracted from the budgetary requirements in determining the budgetary deficit.

(b) Applicable earned income for persons included in the assistance plan shall equal gross earned income or the adjusted gross earned income from self-employment, less the following items:

(1) Ninety dollars for each employed person;

(2) for all persons in an ADC or APW assistance plan and for all children in an ADC-FC, GA-FC, or GA assistance plan, the ADC earned income disregards of \$30.00 and ½ of the remainder, for:

(A) Each applicant who had received assistance in one of the four preceding months and who had not had the disregards applied to the applicant's income for the periods of time specified in subparagraph (B) of this subsection; and

(B) each recipient. The ½ disregard shall continue for a period of time not to exceed four consecutive months and the \$30.00 disregard shall continue for a period not to exceed 12 consecutive months; and

(3) reasonable and not excessive expenses for child care or expenses for the care of an incapacitated person. The amount of deductible dependent care shall not exceed \$200.00 per person for persons under age two or \$175.00 per person for persons age two or older. The dependent shall be included in the assistance plan before the deduction is allowed. For cases subject to retrospective budgeting, for the first and second months of employment, the agency may, based on an agency-approved plan, meet the cost of child care directly or through reimbursement and apply the child care disregard to offset income received in those

months when determining the amount of the payment for the corresponding payment months. Under these circumstances, the agency shall not apply the disregard to income used to determine the amount of the payment for the two months following the month in which child care ceases.

Once an individual has received the appropriate earned income disregard for the time period specified above in subparagraph (2)(B) in a program through which the individual's needs were met with federal funds, the individual shall not again be eligible for the earned income disregards specified in subparagraph (2)(B) above until after the individual has ceased to receive federally-funded assistance for 12 consecutive months. Once an individual has received the appropriate earned income disregard for the time period specified above in subparagraph (2)(B) in a statefunded program, the individual shall not again be eligible for such earned income disregards until after the individual has ceased to receive state-funded assistance for 12 consecutive months. If the client would have been eligible to receive the earned income disregard in any month, but did not receive it due to the client's failure to comply with an eligibility or procedural requirement or due to the provisions of subsection (c), the month the client would have been eligible for the disregard shall be counted in determining the four and 12 consecutive month periods. If income from a recurring source resulted in suspension or termination due to an extra paycheck, the month of ineligibility shall not interrupt the accumulation of consecutive months of the \$30.00 and 1/3 disregard, nor shall it count as one of the consecutive months.

(c) The earned income disregards specified in subsection (b) shall not be applicable to earnings that are not timely reported on the monthly status report form without good cause or when the individual:

(1) Has terminated employment or has reduced earnings without good cause within a period of not less than 30 days preceding the payment month for applicants or the report month for recipients;

(2) has refused without good cause to accept a bona fide offer of employment within the 30-day period preceding the payment month for applicants or the report month for recipients; or

(3) voluntarily requests assistance to be terminated for the primary purpose of avoiding receipt of the \$30.00 and ½ disregard for four consecutive months.

(d) For self-employed persons, adjusted gross earned income equals gross earned income less costs of the production of the income. Income-producing costs include only those expenses directly related to the actual production of income. The following guidelines shall be used by the agency in calculating the cost of the production of the income.

(1) The public assistance program shall not be used to pay debts, set up an individual in business, subsidize a nonprofit activity, nor treat income on the

basis of IRS policies.

(2) If losses are suffered from self-employment, the losses shall not be deducted from other income nor may a net loss of a business be considered as an income-producing cost. (continued)

(3) If a business is being conducted from a non-home location, business space and utilities shall be considered as income-producing costs.

(4) If a business is being conducted from a person's own home, shelter and utility costs shall not be considered as income-producing costs unless they are clearly distinguishable from the home operation.

(5) If payments increase the equity in equipment, vehicles, or other property, the payments shall not be

considered as income-producing costs.

(6) If equipment, vehicles, or other property are being purchased on an installment plan, the actual interest paid may be considered as an income-producing cost.

(7) Depreciation on equipment, vehicles, or other property shall not be considered as an income-pro-

ducing cost.

- (8) Insurance payments on equipment, vehicles, or other property shall be allowed if the payments directly relate to the business.
- (9) Expenses for inventories and supplies that are reasonable and required for the business shall be considered as income-producing costs.

(10) Wages and other mandated costs related to wages paid by the applicant or recipient shall be con-

sidered as income-producing costs.

- (e) In determining eligibility and the amount of payment, the applicable earned and unearned income of a stepparent or the parent of a minor parent not included in the assistance plan or of an alien who is a parent of an ADC child and who is excluded from the assistance plan due to the provisions of P.L. 99-603, effective May 1, 1987, the immigration reform and control act of 1986 to be counted shall equal gross income or the adjusted gross income of the self-employed less the following items:
 - (1) Seventy-five dollars of earned income;
- (2) the standards for budgetary requirements of the above referenced persons and dependents in the same household who are claimed by the above referenced persons for internal revenue service purposes and who are not in the assistance plan;

(3) amounts paid by the above referenced persons to persons not living in the same household and claimed as dependents for internal revenue service

purposes; and

(4) alimony or child support payments to individuals not living in the household which are made by the

above referenced persons.

- (f) For a person in the home whose income must be considered and who is not included in the assistance plan, all nonexempt, unearned income and gross earnings, or adjusted gross earnings of the self-employed, shall be considered without the application of any income disregards, unless otherwise prohibited by law.
- (g) The income of an alien's sponsor shall be considered in determining eligibility and the amount of payment for the alien as prescribed by the secretary of health and human services and as approved by the secretary of social and rehabilitation services.
- (h) All net, unearned income of persons included in the assistance plan shall be applicable unless ex-

empted. Net unearned income shall equal gross unearned income less the costs of the production of the income. Income-producing costs include only those expenses directly related to the actual production of income. The principles set forth in subsection (d) of this regulation regarding the calculation of income-producing costs shall be applicable. The effective date of this regulation shall be May 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-708c; implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended, T-83-17, July 1, 1982; amended May 1, 1983; amended, T-85-26, Oct. 15, 1984; amended May 1, 1985; amended May 1, 1986; amended May 1, 1987; amended, T-88-10, May 1, 1987; amended, T-88-59, Dec. 16, 1987; amended May 1, 1988; amended Oct. 1, 1989; amended Jan. 2, 1990; amended May 1, 1991.)

30-4-112. Income exempt from consideration as income and as a cash asset. The following income shall be exempt, except as provided in K.A.R. 30-4-110(b): (a) Grants to any undergraduate student for educational purposes that are made or insured under any programs administered by the commissioner of education;

(b) grants obtained and used for purposes of meeting needs not related to current living costs;

(c) the value of the coupon allotment under the food

stamp program;

(d) the value of the U.S. department of agriculture donated foods;

- (e) the value of supplemental food assistance received under the child nutrition act of 1966, as amended, and the special food service program for children under the national school lunch act, as amended;
- (f) benefits received under title VII, nutrition program for the elderly, of the older Americans act of 1965, as amended;
- (g) Indian funds distributed or held in trust, including interest and investment income accrued on such funds while held in trust and initial purchases made with such funds;
- (h) distributions to natives under the Alaska native claims settlement act;
- (i) payments provided to individual volunteers serving as foster grandparents, senior health aides and senior companions, and to persons serving in the service corps of retired executives and active corps of executives under titles II and III of domestic service act of 1973;
- (j) payments to individual volunteers under title I, sec. 404(g) of Public Law 93-113 when the director of ACTION determines that the value of such payments, adjusted to reflect the number of hours such volunteers are serving, is less than the federal minimum wage;

(k) payments received under the uniform relocation assistance and real property acquisition policies act of 1970:

19/0;

- (l) death benefits from SSA, VA, railroad retirement, or other burial insurance policy when the benefit is used toward the cost of burial;
- (m) a one-time payment or a portion of a one-time payment from a cash settlement for repair or replace-

ment of property or for legal services, or medical costs or other required obligations to a third party, if the payment is expended or committed to be expended for the intended purpose within six months of its receipt;

(n) money which VA determines may not be used for subsistence needs held in trust by VA for a child;

(o) retroactive corrective assistance payments in the month received or in the following month;

(p) income directly provided by vocational rehabilitation;

(q) benefits from special government programs at the discretion of the secretary, including energy assistance programs, and VA aid and attendance and housebound allowances;

(r) assistance provided by another agency or organization that complements, but does not duplicate assistance provided by the agency;

(s) reimbursements for out-of-pocket expenses in the month received and the following month; and

(t) proceeds from any bona fide loan requiring

repayment;

(u) payments granted to certain U.S. citizens of Japanese ancestry and resident Japanese aliens under Title I of Public Law 100-383; and

(v) payments granted to certain Aleuts under Title II of Public Law 100-383.

(w) agent orange settlement payments; and

- (x) foster care and adoption support payments. The effective date of this regulation shall be May 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-708c; implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended May 1, 1983; amended May 1, 1984; amended May 1, 1986; amended May 1, 1987; amended, T-88-14, July 1, 1987; amended May 1, 1988; amended July 1, 1989; amended Oct. 1, 1989; amended Jan. 2, 1990; amended, T-30-7-2-90, July 2, 1990; revoked, T-30-8-14-90, Oct. 1, 1990; amended Oct. 1, 1990; amended May 1, 1991.)
- 30-4-113. Income exempt as applicable income. The following income shall be exempt as applicable income in the determination of the budgetary deficit: (a) Earned income of a recipient child if the child is under the age of 18 years and a full-time student or if the child is a part-time student and is not a fulltime employee;

(b) earned income of a recipient child who is 18

years of age and a full-time student;

(c) irregular, occasional or unpredictable monetary gifts not to exceed \$30.00 per person in any calendar quarter, except this subsection is not applicable to gifts in excess of \$30.00;

(d) unearned income-in-kind;

(e) shelter cost participation payments. In shared living arrangements in which two families contribute toward the shelter obligations, any cash paid toward the shared shelter obligation by one family to the second family in the shared arrangement shall not be considered as income to the second family. This exemption shall not be applicable in a bona fide, commercial landlord-tenant arrangement;

(f) tax refunds and rebates;

(g) incentive payments received by renal dialysis

patients;

(h) home energy assistance furnished by a federal or state regulated entity whose revenues are primarily derived on a rate-of-return basis, by a private, nonprofit organization, by a supplier of home heating oil or gas, or by a municipal utility company which provides home energy, if the assistance provided is based on need;

(i) income of a child received from a youth program funded by the job training partnership act of 1982, except that earned income received under the program shall only be exempt for a period of six months;

(j) housing assistance from federal housing

programs;

(k) assistance payments in the month received;

(l) the first \$50.00 of child support or child support in combination with spousal support received in a

month; and

- (m) support payments received following the effective date of the assignment of support rights to the agency. However, reported current support which is in excess of the amount exempted in subsection (1) of this section and which, if prospectively treated as nonexempt income, would result in ineligibility, or a support refund disbursed by the agency to the recipient, shall not be exempt income. The effective date of this regulation shall be May 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-708c; implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended May 1, 1983; amended, T-84-11, July 1, 1983; amended, T-84-25, Sept. 19, 1983; amended May 1, 1984; amended, T-85-26, Oct. 15, 1984; amended May 1, 1985; amended, T-87-15, July 1, 1986; amended May 1, 1987; amended, T-88-59, Dec. 16, 1987; amended May 1, 1988; amended Sept. 26, 1988; amended July 1, 1989; amended Oct. 1, 1989; amended May 1, 1991.)
- 30-4-120. Special allowances and requirements for applicants and recipients of ADC, ADC-FC, APW, GA and GA-FC. (a) Special allowances. Special allowances shall be issued to otherwise eligible recipients under the conditions as specified. The allowances shall include, but are not limited to, the following:

(1) Transportation. In accordance with an agencyapproved plan, an allowance for work-related transportation expenses shall be issued for each person who is assigned to participate in a KanWork or work pro-

gram activity.

(2) Day care. An allowance for work-related day care expenses shall be issued in accordance with an agency-

approved plan.

(3) Education and training. If there is an agencyapproved plan, the education and training costs shall be allowed for the participant. Such costs shall include, but are not limited to, tuition, books and fees.

(4) Transition services. Transitional expenses shall be allowed for any recipient who loses eligibility as outlined in K.A.R. 30-4-63(d) and 30-4-64(d). Such expenses may include, but are not limited to, child care

and transportation. Extended medical assistance shall be provided as outlined in K.A.R. 30-6-65(n).

(b) Special requirements. The following special requirements shall be added to the basic and shelter standards as outlined in K.A.R. 30-4-100 to compute the budgetary requirements for applicants and recipients under the conditions as specified.

(1) Moving expense. The cost of moving to a new location to take employment, in an amount not to exceed \$100.00, shall be allowed if other funds are not available to meet the costs and the recipient has employment which meets at least 75% of the family's basic and shelter standards. Moving costs shall include transportation costs of moving household goods for the individual and family to the job location.

(2) Temporary out-of-home care for children. The cost of temporary out-of-home care may be allowed if:

(A) The child is temporarily absent from the home due to the illness of another member of the household, or the incarceration of the caretaker relative;

(B) the temporary absence is only for a portion of

a calendar month; and

(C) there is an approved service plan. The amount

to be allowed shall be the foster care standard.

(3) Clothing for persons entering care facilities, not applicable to ADC-FC or GA-FC foster family care. The cost of an initial clothing supply, in an amount not to exceed \$150.00, shall be allowed if the applicant or recipient is being placed in a care facility on a permanent basis and the person requires an initial clothing supply.

(4) Travel and subsistence to and from child care facilities. If there is an approved service plan, the costs of travel and subsistence shall be allowed for the applicant or recipient and the person providing the transportation for a preplacement visit, admission or home visit, or for the relatives who are required to visit a child. The transportation shall not be related to discharge from a state institution.

(5) Home visits from a child care facility. The costs of a visit to a relative's home or foster family home on a planned trial basis shall be allowed based on an approved service plan. The amount and the length of the visit allowed shall be established in the social serv-

ice plan.

(6) Special requirements related to ADC-FC and GA-FC. Certain special requirements for various costs for children in ADC-FC and GA-FC shall be allowed based on an approved service plan.

(7) Conservator or personal representative expense. The fee of the legally appointed conservator for conservatorship or the personal representative fee for service shall be allowed if:

(A) The conservator or personal representative

charges for those services; and

(B) the conservator or personal representative is not the spouse, parent, or child of the incapacitated person. The amount allowed by the court, or the charge made by the conservator or personal representative, to a maximum of 5% of the person's cash payment or \$8.00, whichever is greater, shall be allowed. The effective date of this regulation shall be May 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-708c; imple-

menting K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amending, E-82-11, June 17, 1981; amended May 1, 1982; amended, T-84-8, March 29, 1983; amended May 1, 1983; amended, T-84-9, March 29, 1983; amended, T-84-25, Sept. 19, 1983; amended May 1, 1984; amended May 1, 1985; amended May 1, 1986; amended, T-87-33, Dec. 1, 1986; amended May 1, 1987; amended, T-88-14, July 1, 1987; amended May 1, 1988; amended, T-30-7-29-88, July 29, 1988; amended Sept. 26, 1988; amended Oct. 1, 1989; amended, T-30-3-29-90, April 1, 1990; amended, T-30-7-2-90, Aug. 1, 1990; revoked, T-30-8-14-90, Oct. 1, 1990; amended Oct. 1, 1990; amended Jan. 7, 1991; amended May 1, 1991.)

Article 5.—PROVIDER PARTICIPATION, SCOPE OF SERVICES, AND REIMBURSEMENTS FOR THE MEDICAID (MEDICAL ASSISTANCE) PROGRAM

30-5-92. Scope of pharmacy services. (a) The scope of medical services provided to program recip-

ients shall include pharmacy services.

(1) Kan Be Healthy participants shall be limited to prescription-only and over-the-counter drugs, supplies and devices which have been accepted for inclusion on any formulary listing which is adopted and distributed by the agency to eligible providers of service.

- (2) Other medicaid recipients shall be limited to designated prescription-only and over-the-counter drugs, supplies and devices which have been accepted for inclusion on any formulary listing which is adopted and distributed by the agency to eligible providers of
- (b) Covered drugs, supplies and devices shall be prescribed by the recipient's attending practitioner and dispensed in a pharmacy by a pharmacist with the exception of those drugs, supplies or devices designated by the agency.

(c) Providers of pharmacy services shall comply with the provisions of K.A.R. 30-5-59 and shall be assigned a pharmacy services provider number and professional

fee for computation of reimbursement.

- (d) Certain less than effective drugs, supplies, devices and drugs that do not meet the requirements of OBRA 1990, Section 4401, pertaining to available rebates or medical necessity of the drug, or that do meet the permissible restrictions of Section 4401 may be denied reimbursement under the program after prior notification of providers. Selected drugs shall be considered for coverage only when prior authorization criteria are met.
- (e) Pharmacy services provided for parenteral administration of total nutritional replacements and intravenous medication in the recipient's home shall require participation of nursing services from a local home health agency. In areas not served by a home health agency, the services of a local health department or advanced registered nurse practitioner shall be required.

(f) The total number of prescriptions which a recipient may receive in a given time period shall be limited

as determined by the secretary.

(g) Selected pharmacy services shall be limited to a dollar value for a given time period as determined by

the secretary.

The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 39-708c; effective May 1, 1981; amended May 1, 1985; amended May 1, 1986; amended May 1, 1988; amended Jan. 2, 1989; amended Aug. 1, 1990; amended May 1, 1991.)

30-5-94. Reimbursement for pharmacy services. (a) Pharmacy providers shall be reimbursed for covered pharmacy services on the basis of product acquisition cost plus a professional fee. The submitted charge and payment for covered over-the-counter pharmacy products shall not exceed the lesser of the product acquisition cost plus the professional fee or the usual and customary over-the-counter charge of the pharmacy provider.

(b) The acquisition cost shall include a maximum allowable cost reimbursement limitation for selected multiple source drugs determined by the Kansas department of social and rehabilitation services. The acquisition cost may be limited to a level as established

by the secretary of the department.

(c) The calculated professional fee assigned to pharmacy providers shall be based upon each individual pharmacy's historical operating costs, as determined by analysis of data submitted on an annual cost report. The professional fee shall be limited to the lesser of:

(1) The 85th percentile of allocated costs per prescription for all pharmacies filing a cost report, plus a

reasonable profit;

(2) usual and customary fee charges of each individual pharmacy, as determined by the prescription

survey section of the pharmacy cost report;

(3) a factor of 1.075 multiplied by the lowest professional fee accepted by each individual pharmacy provider through participation in any pharmacy services program:

(Ă) In which partial or total reimbursement is made

by a party other than the consumer; and

(B) in which total reimbursement from participation in any such program comprises 5% or more of the total prescription sales, not including sales for medical equipment and supplies, for the pharmacy during their most recently completed fiscal year; or

(4) a rate as established by the secretary of the

department.

- (d) The department may elect to further limit the professional fee assignment of individual pharmacy providers through use of a multiple regression analysis based on cost study data from all pharmacy cost reports. Individual pharmacy providers with data which exceeds selected regression analysis norms by a factor greater than a standard deviation of 1.0 shall have allocated cost data relative to the selected norm limited to a value at a standard deviation of 1.0 above the norm.
- (e) Completed cost reports, pursuant to the provisions of subsection (c), shall be due 90 days after notice from the department. Delinquent cost reports shall not be accepted after 15 days after the 90 days following notice from the department.

(f) Pharmacies who elect to submit only a usual and customary prescription survey pursuant to K.A.R. 30-5-95 will be assigned a dispensing fee by the department which is the lesser of:

(1) The individual pharmacy's average gross profit as calculated from the usual and customary prescrip-

tion survey; or

(2) the lowest calculated dispensing fee for any pharmacy that files a complete and detailed cost report.

(g) Out-of-state pharmacy providers, new Kansas pharmacies, and Kansas pharmacies that were in business for less than six months in the cost reporting period shall not be required to file a cost report and shall be assigned professional fees determined from mean and average cost data for all pharmacies that file a cost report. If the annual volume of payments to an out-of-state pharmacy provider reaches a substantial level, the filing of a cost report shall be required.

(h) (1) New Kansas pharmacies who were assigned a dispensing fee according to subsection (g) may, at their option, file complete cost reports after meeting

the following criteria:

(A) Achieve a fiscal year end; and

(B) have at least six months of verifiable data prior

to a fiscal year end.

(2) The cost reports shall be provided by the department and shall include the usual and customary survey as well as detailed operating costs. The survey dates to be used in the usual and customary survey will be the first business day of the second, third, fourth, and fifth months within the cost reporting period.

(3) The cost reports will be analyzed by the department and new dispensing fees calculated. The new fees shall take effect no later than 60 days following the date of receipt of the complete cost reports. There will be no retroactive cost adjustment or settlement.

(i) Pharmacy providers involved in an ownership change shall notify the Kansas department of social and rehabilitation services in writing at least 10 days prior to the effective date of the change of ownership.

(1) Failure to provide this notice shall result in: .

(A) The forfeiture of the right to payment for covered services provided to recipients by the previous owner or owners in the 30-day period prior to the effective date of the change of ownership; and

(B) the new owner or owners assuming responsibility for any overpayment made to the previous owner or owners before the effective date of the change of ownership. This shall not release the previous owner of responsibility for such overpayment.

(2) This notification requirement may be waived at the discretion of the secretary of the department based upon the showing of good cause by a pharmacy chang-

ing ownership.

(3) The new owner or owners shall submit an application to be a provider of services in the program but shall not receive reimbursement for covered services provided to recipients from the effective date of the change of ownership until the later of:

(A) The date all requirements for participation pur-

suant to K.A.R. 30-5-59 are met; or

(continued)

(B) the date the application is received by the

department.

(4) Pharmacy providers involved in a change of ownership and who timely notify the department of the ownership change shall be assigned an initial professional fee based on cost data from the previous owner's cost report, if submitted, and on weighted mean labor costs per prescription for all pharmacy providers that file a cost report.

(j) Pharmacies that are inactive pursuant to K.A.R. 30-5-59 shall be considered new pharmacies when re-

activated.

(k) In areas where pharmacy services are not available, each physician dispensing prescriptions to program recipients shall be eligible to receive reimbursement for provision of those services after a pharmacy provider number has been issued by the department pursuant to K.A.R. 30-5-59.

(1) Physicians assigned a pharmacy provider number shall be reimbursed on the basis of product acquisition cost plus a professional fee of \$1.00 per

prescription.

(2) Payment shall not apply to injectible drugs not intended for self-administration by the patient except as included in the charge for the professional services

of the physician.

- (1) Reimbursement shall be made to the pharmacy provider only when the covered service has been prescribed by the recipient's attending practitioner. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c; effective May 1, 1981; amended May 1, 1983; amended May 1, 1984; amended May 1, 1985; amended May 1, 1986; amended July 1, 1989; amended, T-30-12-28-89, Jan. 1, 1990; amended, T-2-28-90, Feb. 28, 1990; amended May 1, 1991.)
- **30-5-95.** Cost report requirement for pharmacy services. (a) The cost reports filed by pharmacy providers for professional fee determination shall reflect data which coincides with the immediate fiscal year used for federal income taxes that ends prior to the cost report filing due date; except in those cases where the provider is not required to file a federal income tax return. In such cases, the provider shall file a cost report from the official financial reporting records of the business.
- (b) (1) A detailed cost report shall be filed in each odd-numbered year and an interim cost report shall be filed in each even-numbered year. The initial cost report filed by all pharmacies shall be the detailed cost report, regardless of the year in which it is filed. Pharmacies shall have been in operation for a minimum of six months in the cost reporting period to file an initial cost report.
- (2) After the initial submission of a detailed cost report by a new provider, new pharmacy or pharmacy which has changed ownership, a pharmacy may elect in subsequent years not to file the detailed pharmacy cost report. The assignment of fees to such a pharmacy requires the submission of a prescription survey in a format designed by the Kansas department of social and rehabilitation services, and which reflects the av-

erage gross profit per prescription and other pertinent information.

(3) Failure or refusal by a Kansas pharmacy, or an out-of-state pharmacy, when required, to file cost reports shall result in assignment to that pharmacy of a

professional fee of \$0.00.

(c) Cost report and prescription survey forms, instructions, and notice of the requirement to file shall be prepared by the Kansas department of social and rehabilitation services and distributed to all pharmacy providers as required. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c; effective May 1, 1981; amended May 1, 1984; amended May 1, 1987; amended July 1, 1989; amended May 1, 1991.)

Article 6.—MEDICAL ASSISTANCE PROGRAM—CLIENTS' ELIGIBILITY FOR PARTICIPATION

30-6-65. Automatic eligibles. To be automatically eligible for medical assistance, each person shall meet the general eligibility requirements of K.A.R. 30-6-56, 30-6-63 and 30-6-106(c)(2) and shall be: (a) Legally entitled to and receiving SSI benefits and in compliance with the general eligibility requirements of residence;

(b) legally entitled to and receiving state supple-

mental payments from Kansas related to SSI;

(c) determined by SSA to retain recipient status, al-

though not currently receiving an SSI benefit;

- (d) receiving public assistance, excepting emergency assistance, pursuant to article 4 of this chapter. Such recipients shall meet the general eligibility requirement of K.A.R. 30-6-55(d);
- (e) not receiving public assistance for one of the following reasons:
- (1) The person is eligible for less than \$10.00 of public assistance;
- (2) the amount of recovery of an overpayment is

greater than the budget deficit; or

- (3) the person is eligible using prospective budgeting, but ineligible due to retrospective accounting of income;
- (f) included in the assistance plan of a family which was receiving ADC, ADC-FC, or APW in at least three of the six months immediately preceding the month in which the family became ineligible for ADC, ADC-FC, or APW as a result, in whole or in part, of collection or increased collection of support. Such recipients shall meet, the general eligibility requirement of K.A.R. 30-6-55(d). Automatic eligibility for the medical assistance program shall continue for the four months immediately subsequent to the last month in which the family was eligible and legally entitled to receive ADC, ADC-FC, or APW as long as the family remains ineligible for ADC, ADC-FC, or APW due to such collection or increased collection of support;

(g) mandated to receive inpatient treatment for

tuberculosis;

- (h) one who is not a public assistance recipient but is receiving maintenance payments from youth services;
 - (i) a non-ADC eligible child who is under 18 years

of age and who meets the ADC income and resource requirements pursuant to article 4 of this chapter;

(j) a child born to a mother eligible for and receiving medicaid at the time of birth for a period of up to one year. The child shall remain eligible so long as such mother remains eligible for medicaid or would be eligible for medicaid if still pregnant. The child must also remain in the same household with the mother;

(k) a child receiving foster care payments under title

IV-E, regardless of the state making payment;

(l) a child for whom an adoption assistance agreement under title IV-E is in effect, even if assistance payments are not being made or the adoption assistance agreement was entered into with another state. Automatic eligibility begins when the child is placed for adoption even if an interlocutory decree of adoption or a judicial decree of adoption has not been issued;

(m) a child for whom a non-title IV-E adoption assistance agreement is in effect between the state and the adoptive parents and who cannot be placed without medical assistance because the child has special

needs for medical or rehabilitative care; or

(n) included in the assistance plan of a family who:

(1) Has received ADC or APW in three of the six months immediately preceding the first month of transitional medical services;

(2) has lost eligibility for ADC or APW beginning in or after the month of April, 1990 due solely to increased earned income or hours of employment of the caretaker relative or due solely to termination of the earned income disregards as provided in K.A.R. 30-4-

(3) has not been rendered ineligible for assistance as a result of a fraud determination at any time during the six months immediately preceding the first month

of transitional medical services.

(A) Assistance under this provision shall be initially provided for a period not to exceed six months if there continues to be a child in the family and if the individual continues to be a resident of the state and provides ongoing status reports as may be required by

the secretary.

(B) Assistance shall be provided for an additional six-month period of time if there continues to be a child in the family and if the individual continues to be a resident of the state, provides ongoing status reports as may be required by the secretary and continues employment. Assistance shall be terminated when the person's gross earned income, less the cost of child care, exceeds 185% of the official federal poverty income guidelines. Persons who are not otherwise eligible for medicaid without a spenddown and who have gross earned income, less the cost of child care, that exceeds 100% of the official federal poverty income guidelines shall be responsible for contributing to the payment of the cost for medical coverage. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c, 39-709, 39-7,103; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended, T-84-8, March 29, 1983; amended May 1, 1983; amended, T-84-9, March 29, 1983; amended May 1, 1984; amended, T-85-26, Oct. 15, 1984; amended, T-

85-34, Dec. 19, 1984; amended May 1, 1985; amended, T-86-19, July 1, 1985; amended May 1, 1986; amended, T-87-5, May 1, 1986; amended, T-87-15, July 1, 1986; amended, T-87-29, Nov. 1, 1986; amended, T-87-44, Jan. 1, 1987; amended May 1, 1987; amended, T-88-10, May 1, 1987; amended, T-88-14, July 1, 1987; amended May 1, 1988; amended, T-30-7-29-88, July 29, 1988; amended Sept. 26, 1988; amended Oct. 1, 1989; amended Jan. 2, 1990; amended, T-30-12-28-89, Jan. 1, 1990, amended, T-30-2-28-90, Feb. 28, 1990; amended, T-30-3-29-90, April 1, 1990; amended, T-30-7-2-90, Aug. 1, 1990; revoked, T-30-8-14-90, Oct. 1, 1990; amended Oct. 1, 1990; amended Jan. 7, 1991; amended May 1, 1991.)

30-6-77. Poverty level pregnant women and young children; determined eligibles. Each applicant or recipient shall meet the general eligibility requirements of K.A.R. 30-6-50 and the specific eligibility requirements set forth below. (a) Pregnant woman. Each eligible woman shall be medically determined to be pregnant. Assistance under this provision shall continue for two calendar months following the month in which the pregnancy terminates.

(b) Infants. Each eligible infant shall be under one year of age. Assistance under this provision shall

(1) Through the month in which the child turns age

(2) if receiving inpatient services in the month in which the child turns age one:

(A) Through the calendar month in which that in-

patient care ends; or

(B) through the calendar month following the month the care begins, whichever is sooner. If the inpatient care will exceed that time period, eligibliity for the child under this provision shall end on the last day of the calendar month in which the child turns age one.

(c) Other young children. Each eligible child shall be at least one year of age, but no older than six years of age. Assistance under this provision shall continue:

(1) Through the month in which the child turns age

six; or

(2) if receiving inpatient services in the month in

which the child turns age six:

(A) Through the calendar month in which that in-

patient care ends; or

(B) through the calendar month following the month the care begins, whichever is sooner. If the inpatient care will exceed that time period, eligibility for the child under this provision shall end on the last day of the calendar month in which the child turns age six.

(d) Persons whose needs are to be considered in

determining eligibility.

(1) For pregnant women, the needs of the pregnant woman, the unborn child and the father of the unborn child shall be considered if living together. If the pregnant woman is a minor, the needs of her parents shall also be included if living together with the minor.

(2) For young children, the needs of the child and the child's parents shall be considered if living

together.

(continued)

(3) Other pregnant women and young children in the family group for whom assistance is requested shall be included in the assistance plan if otherwise eligible.

(e) Financial eligibility. A percentage of the official federal poverty income guidelines as established in K.A.R. 30-6-103 shall be used as the protected income level for the number of persons in the plan and any other persons in the family whose income is being considered. Total applicable income to be considered in the eligibility base period shall be compared against the poverty level for the base period. To be eligible under this provision, the total applicable income shall not exceed the poverty level established for the base period. Ownership of excess nonexempt real or personal property shall not result in ineligibility.

(f) Continuous eligibility. A pregnant woman who becomes eligible for assistance under this regulation shall continue to be eligible throughout her pregnancy and the two calendar months following the month her pregnancy terminates without regard to any changes in family income. The effective date of this regulation shall be May 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-708c; implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective, T-30-71-88, July 1, 1988; effective Sept. 26, 1988; amended July 1, 1989; amended, T-30-3-29-90, April 1, 1990; amended, T-30-7-2-90, Aug. 1, 1990; revoked, T-30-8-14-90, Oct. 1, 1990; amended Oct. 1, 1990; amended, T-30-12-28-90, Jan. 2, 1991; amended May 1, 1991.)

30-6-86. Poverty level medicare beneficiaries; determined eligibles. Each applicant or recipient shall meet the general eligibility requirements of K.A.R. 30-6-50 and the specific eligibility requirements set forth below. (a) Age, blindness or disability. Each individual must meet the age, blindness or disability requirements of K.A.R. 30-6-85.

(b) Medicare part A beneficiary. Each individual must be entitled to medicare part A benefits.

(c) Financial eligibility. A percentage of the official federal poverty income guidelines as established in K.A.R. 30-6-103 shall be used as the protected income level for the number of persons in the plan and any other persons whose income is considered. Total applicable income to be considered in the eligibility base period shall be compared against the poverty level for the base period. However, the amount of an annual social security cost-of-living adjustment shall be disregarded in determining eligibility during the first quarter of the year for which the adjustment is provided. To be eligible under this provision, the total applicable income shall not exceed the poverty level established for the base period. The individual must also not own nonexempt real or personal property with a resource value in excess of two times the allowable amount specified in K.A.R. 30-6-107 for the number of persons whose nonexempt resources are considered available to the individual.

(d) Assistance provided. Assistance under this provision shall be limited to the payment of allowable medicare premiums, deductibles and coinsurance. The effective date of this regulation shall be May 1, 1991. (Authorized by K.S.A. 1990 Supp. 39-708c; implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective

Jan. 2, 1989; amended July 1, 1989; amended, T-30-12-28-90, Jan. 2, 1991; amended May 1, 1991.)

30-6-103. Determined eligibles; protected income levels. (a) Independent living and home- and community-based services arrangements.

(1) The protected income level for persons in independent living arrangements and in the home- and community-based services program shall be based on the total number of persons in the assistance plan and any other persons in the family group whose income is being considered.

(2) The protected income levels for independent living may also be used when an applicant or recipient:

(A) Enters a medicaid-approved facility, except that this provision shall not apply in situations where only one spouse of a married couple enters an institutional living arrangement; or

(B) is absent from the home for medical care for a period not to exceed two months to allow for maintaining the applicant's or recipient's independent living

arrangements.

(3) Except as provided in paragraph (4), (5) and (6) below, the following table shall be used to determine the protected income level for persons in independent living.

PERSONS IN INDEPENDENT LIVING (Per Month)

1 2 3 \$407.00 \$460.00 \$465.00

The protected income level for additional persons shall be the sum of the basic standard for a like public assistance family plus the maximum state shelter standard.

- (4) In determining eligibility for pregnant women and for infants under the provisions of K.A.R. 30-6-77(a) and (b), 150% of the official federal poverty income guidelines shall serve as the protected income level.
- (5) In determining eligibility for other young children under the provisions of K.A.R. 30-6-77(c), 133% of the official federal poverty income guidelines shall serve as the protected income level.

(6) In determining eligibility for medicare beneficiaries under the provisions of K.A.R. 30-6-86, 100% of the official federal poverty income guidelines shall

serve as the protected income level.

(7) In determining eligibility for working disabled individuals under the provisions of K.A.R. 30-6-87, 200% of the official federal poverty income guidelines shall serve as the protected income level.

(b) Institutional living arrangements. For persons residing in institutional settings, the protected income level shall be \$30.00 except as noted in paragraph (2)

of subsection (a).

(c) Specialized living arrangements. The protected income level for persons residing in approved, specialized living arrangements, including adult family homes, home- and community-based congregate care facilities, and child care facilities, shall be established by the secretary. The effective date of this regulation shall be May 1, 1991. (Authorized by and implement-

ing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-11, June 17, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended, T-83-17, July 1, 1982; amended May 1, 1983; amended, T-84-11, July 1, 1983; amended, T-84-36, Dec. 21, 1983; amended May 1, 1984; amended, T-85-34, Dec. 19, 1984; amended May 1, 1985; amended, T-86-19, July 1, 1985; amended, T-86-42, Jan 1, 1986; amended May 1, 1986; amended, T-87-15, July 1, 1986; amended, T-88-2, Feb. 1, 1987; amended May 1, 1987; amended, T-88-10, May 1, 1987; amended, T-88-14, July 1, 1987; amended, T-88-59, Dec. 16, 1987; amended May 1, 1988; amended, T-30-7-1-88, July 1, 1988; amended Sept. 26, 1988; amended Jan. 2, 1989; amended July 1, 1989; amended Oct. 1, 1989; amended Jan. 2, 1990; amended T-30-12-28-89, Jan. 1, 1990; amended, T-30-3-29-90, April 1, 1990; revoked, T-30-7-2-90, July 2, 1990; amended, T-30-7-2-90, July 2, 1990; revoked, T-30-8-14-90, Oct. 1, 1990; amended Oct. 1, 1990; amended Jan. 7, 1991; amended, T-30-12-28-90, Jan. 2, 1991; amended May 1, 1991.)

30-6-106. General rules for consideration of resources, including real property, personal property, and income. (a) Legal title shall determine ownership for assistance purposes. In the absence of legal title, possession shall determine ownership.

(b) Resources, to be real, shall be of a nature that the value can be defined and measured. The objective measures set forth in paragraphs (1) and (2) below shall

establish the resources' value.

(1) Real property. The value of real property shall be initially determined by the latest uniform statewide appraisal value of the property which shall be adjusted to reflect current market value. If the property has not been appraised or if the market value as determined above is not satisfactory to the applicant or recipient or the agency, an estimate or appraisal of its value shall be obtained from a disinterested real estate broker. The cost of obtaining an estimate or appraisal shall be borne by the agency.

(2) Personal property. The market value of personal property shall be initially determined using a reputable trade publication. If a publication is not available, or if there is a difference of opinion regarding the value of the property between the agency and the individual, an estimate from a reputable dealer shall be used. The cost of obtaining an estimate or appraisal shall be borne

by the agency.

(c) (1) Resources shall be considered available both when actually available and when the applicant or recipient has the legal ability to make them available. A resource shall be considered unavailable when there is a legal impediment that precludes the disposal of the resource. The applicant or recipient shall pursue reasonable steps to overcome the legal impediment unless it is determined that the cost of pursuing legal action would be more than the applicant or recipient would gain or the likelihood of succeeding in the legal action would be unfavorable to the applicant or recipient.

(2) For the purpose of this subsection, a revocable or irrevocable trust shall be considered available to the applicant or recipient up to the maximum value of the

funds which may be made available under the terms of the trust on behalf of the applicant or recipient if:

(A) The trust is established by the applicant, the recipient, the applicant or recipient's spouse, or the applicant or recipient's guardian or legal representative who is acting on the applicant or recipient's behalf;

(B) that applicant or recipient is a beneficiary; and

(C) the trustees are permitted to exercise any discretion with respect to distribution to the applicant or

recipient.

This provision shall not be applicable if the applicant or recipient is a mentally retarded individual who is residing in an intermediate care facility for the mentally retarded provided the trust was established prior to April 7, 1986 and is solely for the benefit of that applicant or recipient.

(3) For SSI, real property shall be considered unavailable for so long as it cannot be sold because:

(A) The property is jointly owned and its sale would cause undue hardship due to the loss of housing for the other owner or owners; or

(B) the owner's reasonable efforts to sell the prop-

erty have been unsuccessful.

(d) The resource value of property shall be that of the applicant's or recipient's equity in the property. Unless otherwise established, the proportionate share of jointly-owned real property and the full value of jointly-owned personal property shall be considered available to the applicant or recipient. Resources held jointly with a non-legally responsible person may be excluded from consideration if the applicant or recipient can demonstrate that the applicant or recipient has no ownership interest in the resource, has not contributed to the resource, and that any access to the resource by the applicant or recipient is limited to those duties performed while the applicant or recipient is acting as an agent for the other person.

(e) Nonexempt resources of all persons in the assistance plan and the nonexempt resources of persons who have been excluded from the assistance plan pursuant to K.A.R. 30-6-74(b) and 30-6-79(c) shall be

considered

(f) (1) The combined resources of husband and wife, if they are living together, shall be considered in determining eligibility of either or both for the medical assistance program, unless otherwise prohibited by law.

(2) A husband and wife shall be considered to be living together if they are regularly residing in the same household. Temporary absences of either the husband or the wife for education or training, working, securing medical treatment or visiting shall not be considered to interrupt the couple's living together.

(3) A husband and wife shall not be considered as living together when they are physically separated and not maintaining a common life, or when one or both enter into an institutional living arrangement, including either a medicaid-approved or non-approved medical facility or a home- and community-based services care arrangement. If only one spouse enters an institutional living arrangement, the provisions of subsection (m) below apply. If both spouses enter an

(continued)

institutional living arrangement, the combined resources of the husband and wife shall be considered available to both for the month in which the institutional arrangement begins.

(g) The resources of an ineligible parent shall be considered in determining the eligibility of a minor child for the medical assistance program if the parent

and child are living together.

(h) When any individual in the household, who does not have the responsibility to support a person in the plan, voluntarily and regularly contributes cash to the recipient toward household expenses, including maintenance costs, the amount of the contribution to be counted shall be the net income realized by the household.

(i) Despite subsections (e), (f), and (g) above, the resources of an SSI beneficiary shall not be considered in the determination of eligibility for medical assistance of any other person.

(j) The conversion of real and personal property from one form to another shall not be considered as income to the applicant or recipient except for the proceeds from a contract for the sale of property.

(k) Income shall not be considered both as income

and as property in the same month.

(l) Despite subsection (e) above, the resources of a child whose needs are met through foster care payments shall not be considered.

(m) When one spouse enters an institutional living arrangement and the other spouse remains in the community, and an application for medical assistance is made on behalf of the institutionalized spouse, the

following provisions apply:

- (1) The separate income of each spouse shall not be considered available to the other beginning in the month the institutional arrangement begins. Unless otherwise established, ½ of the income which is paid in the names of both spouses shall be considered available to each. Income which is paid in the name of either spouse, or in the name of both spouses and the name of another person or persons, shall be considered available to each spouse in proportion to the spouse's interest, unless otherwise established.
- (2) A monthly income allowance for the community spouse shall be deducted from the income of the institutionalized spouse in determining eligibility. The income allowance for the community spouse, when added to the income already available to that spouse, shall not exceed 122% of the official federal poverty income guideline for two persons plus the amount of any excess shelter allowance. The excess shelter allowance is defined as the amount by which the community spouse's expenses for rent or mortgage payments, taxes and insurance for the community spouse's principal residence plus the \$175.00 food stamp standard utility allowance exceeds 30% of the 122% federal poverty income guideline amount referred to above. The maximum income allowance which can be provided under this provision shall be \$1,662.00. The \$1,662.00 limitation shall be increased annually to reflect the percentage increase in the consumer price index for all urban consumers. If a greater income allowance is provided under a court order of support or through the

fair hearing process, that amount shall be used in place of the above limits.

(3) A monthly income allowance for each dependent family member shall also be deducted from the income of the insitutionalized spouse in determining eligibility. A dependent family member is defined as a minor or dependent child, dependent parent or dependent sibling of either spouse who lives with the community spouse. The allowance for each member shall be equal to 1/3 of 122% of the official federal poverty income guideline for two persons. An allowance shall not be provided if the family member's gross income is in excess of the 122% federal poverty income guideline for two persons.

(4) If the spouse is institutionalized on or after September 30, 1989, the real and personal property of both spouses shall be considered in determining the eligibility of the institutionalized spouse in the month of application based on the amount of property in excess of the community spouse property allowance as set forth in paragraph (m) (6) below. Following the month in which the institutionalized spouse is determined eligible, the property of each spouse shall not be con-

sidered available to the other.

(5) If the spouse was institutionalized before September 30, 1989, the real and personal property of each spouse shall be considered available to the other in the month in which the institutional arrangement began. Thereafter, the property of each spouse shall not

be considered available to the other.

- (6) The institutionalized spouse may make available to the community spouse a property allowance which, when added to the property already available to the community spouse, would be equal to 1/2 of the total value of the property owned by both spouses as of the first period of continuous institutionalization beginning on or after September 30, 1989. This allowance may not exceed \$66,480.00, but shall be no less than \$13,296.00. Both the \$13,296.00 and \$66,480.00 standards shall be increased annually to reflect the percentage increase in the consumer price index for all urban consumers. If a greater property allowance is provided under a court order of support or through the fair hearing process, that amount shall be used in place of the above limits.
- (7) The amount of property received by the community spouse as a result of the property allowance determined in paragraph (m) (6) shall not be considered in determining the eligibility of the institutionalized spouse except as provided in paragraph (m)(4) above. If the institutionalized spouse will be eligible based upon transferring sufficient property to the community spouse to equal the amount of the property allowance, the institutionalized spouse shall be given up to 90 days from the date of application to transfer the property. Additional time may be allowed for good cause. Pending disposition of the property, the institutionalized spouse shall be deemed to be temporarily eligible during this time period if all other eligibility factors are met. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended

May 1, 1982; amended May 1, 1983; amended May 1, 1984; amended, T-85-26, Oct. 15, 1984; amended May 1, 1985; amended May 1, 1986; amended, T-87-15, July 1, 1986; amended, T-87-20, Sept. 1, 1986; amended May 1, 1987; amended, T-88-14, July 1, 1987; amended, T-88-59, Jan. 1, 1988; amended May 1, 1988; amended, T-89-13, April 26, 1988; amended, T-30-7-1-88, July 1, 1988; amended Sept. 26, 1988; amended July 1, 1989; amended Oct. 1, 1989; amended Jan. 2, 1990; amended April 1, 1990; amended, T-30-10-1-90, Oct. 1, 1990; revoked, T-30-11-25-90, Jan. 2, 1991; amended Jan. 7, 1991; amended, T-30-12-28-90, Jan. 2, 1991; amended May 1, 1991.)

30-6-111. Applicable income. Applicable income means the amount of earned and unearned income which is compared with the appropriate protected income level to establish financial eligibility. (a) Non-SSI. All earned income shall be applicable unless exempted in accordance with K.A.R. 30-6-112 and K.A.R. 30-6-113. Applicable earned income shall be determined as

follows

(1) Applicable earned income for persons included in the assistance plan, and except as noted in subparagraph (a) (4) of this regulation, for all persons in the home whose earned income must be considered and who are excluded from the assistance plan, shall equal gross earned income, or the adjusted gross earned income from self-employment, less the follow-

(A) Ninety dollars for each employed person; and

(B) reasonable and not excessive expenses for child care or expenses for the care of an incapacitated person. The amount of deductible dependent care shall not exceed \$200.00 per person for persons under age two or \$175.00 per person for persons age two or older. The dependent shall be included in the assistance plan before the deduction is allowed.

(2) Gross earned income, or the adjusted gross income from self-employment, shall not be reduced

when the applicant or recipient:

(A) Has terminated employment or reduced earnings without good cause within 30 days preceding the month of eligibility; or

(B) has refused without good cause to accept a bona fide offer of employment within the 30-day period pre-

ceding the month of eligibility.

- (3) For self-employed persons, adjusted gross earned income shall equal gross earned income less cost of the production of the income. Income-producing costs shall include only those expenses directly related to the actual production of income. These costs shall be verified. The following guidelines shall be used by the agency in calculating the cost of the production of the income.
- (A) The medical assistance program shall not be used to subsidize the payment of debts, set up an individual in business or a nonprofit activity, nor treat income on the basis of IRS policies.

(B) If losses are suffered from self-employment, the losses shall not be deducted from other income nor shall the net loss of a business be considered as an income-producing cost.

(C) If a business is being conducted from a nonhome location, business space and utilities may be con-

sidered as income-producing costs.

(D) If a business is being conducted from a person's own home, shelter and utility costs shall not be considered as income-producing costs unless it is verifiable that they are clearly distinguishable from the home

(E) If payments increase the equity in equipment, vehicles, or other property, the payments shall not be

considered as an income-producing cost.

(F) If equipment, vehicles, or other property are being purchased on an installment plan, the actual interest paid may be considered as an income-producing cost.

(G) Depreciation on equipment, vehicles, or other property shall not be considered as an income-pro-

ducing cost.

(H) Insurance payments on equipment, vehicles, or other property shall be allowed if the payments directly relate to the business.

(I) Expenses for inventories and supplies that are reasonable and required for the business may be con-

sidered as income-producing costs.

(J) Wages and other mandated costs related to wages paid by the applicant or recipient may be considered

as income-producing costs.

- (4) In determining eligibility and the amount of payment, the applicable earned and unearned income of an alien who is a parent of an ADC child and who is excluded from the assistance plan due to the provisions of P.L. 99-603, effective May 1, 1987, the immigration reform and control act of 1986, shall equal gross income less the following items:
 - (A) Seventy-five dollars of earned income;
- (B) the protected income level for the parent and dependents in the same household who are claimed by the parent for internal revenue service purposes and who are not in the assistance plan;

(C) amounts paid by the parent to persons not living in the same household who are claimed as dependents

for internal revenue service purposes; and

(D) alimony or child support payments to individuals not living in the household which are made by the parent.

(b) SSI. Applicable earned income shall be deter-

mined as follows:

(1) Wages. All earned income shall be applicable except that the provisions of K.A.R. 30-6-112 and K.A.R. 30-6-113 shall be applicable to persons in independent living or in the home- and community-based service program. The applicable earned income shall be gross income less income disregards, if applicable.

(2) Self-employment. The applicable earned income shall be the adjusted gross income less income disregards, if applicable. The principles set forth in paragraph (a)(2) of this regulation in regard to adjusted gross income shall be applicable to calculations made

pursuant to this paragraph.

(c) SSI income disregards.

(1) The following disregards shall apply to persons in independent living or in the home- and communitybased service program:

- (A) The first \$20.00 of any nonexempt, unearned
- (B) an applicable earned income disregard calculated as follows: gross earned income minus any portion of the unearned income disregard that exceeds monthly earned income, plus \$65.00 of monthly earned income, plus 1/2 times the remainder of the monthly earned
- (2) The following disregards shall apply to persons in long term care who are employed:

(A) Seventy-five dollars, if employed full time; and

(B) fifty dollars, if employed part time.

- (d) Applicable unearned income. All net, unearned income, except as noted in paragraph (a)(4) of this regulation, shall be applicable except that the provisions of K.A.R. 30-6-112 and K.A.R. 30-6-113 shall be applicable to persons in independent living or in the home- and community-based service program. The provisions of K.A.R. 30-6-113 (a), (v), (w), (z), and (cc) shall be applicable to persons in long-term care. Net unearned income shall equal gross unearned income less the costs of the production of the income. Incomeproducing costs include only those expenses directly related to the actual production of income. The principles set forth in paragraph (a)(2) of this regulation regarding the calculation of income-producing costs shall be applicable. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended May 1, 1983; amended May 1, 1984; amended, T-85-26, Oct. 15, 1984; amended May 1, 1985; amended, T-86-9, May 1, 1985; amended May 1, 1986; amended May 1, 1987; amended, T-88-10, May 1, 1987; amended, T-88-14, July 1, 1987; amended, T-88-59, Dec. 16, 1987; amended May 1, 1988; amended Oct. 1, 1989; amended Jan. 2, 1990; amended April 1, 1990; amended May 1, 1991.)
- 30-6-112. Income exempt from consideration as income and as a cash asset. Exempted income shall be: (a) Grants to any undergraduate student for educational purposes that are made or insured under any programs administered by the commissioner of education;
- (b) grants obtained and used for purposes of meeting needs not related to current living costs;
- (c) the value of the coupon allotment under the food

stamp program;

- (d) the value of the U.S. department of agriculturedonated foods;
- (e) the value of supplemental food assistance received under the child nutrition act of 1966, as amended, and the special food service program for children under the national school lunch act, as amended;
- (f) benefits received under title VII, nutrition program for the elderly, of the older Americans act of 1965, as amended;
- (g) Indian funds distributed or held in trust, including interest and investment income accrued on such funds while held in trust and initial purchases made with such funds;

- (h) distributions to natives under the Alaska native claims settlement act;
- (i) payments provided to individual volunteers serving as foster grandparents, senior health aides and senior companions, and to persons serving in the service corps of retired executives and active corps of executives under titles II and III of domestic service act
- (j) payments to individual volunteers under title I, sec. 404(g) of Public Law 93-113 when the director of ACTION determines that the value of such payments, adjusted to reflect the number of hours such volunteers are serving, is less than the federal minimum wage;

(k) payments received under the uniform relocation assistance and real property acquisition policies act of 1970;

- (l) death benefits from SSA, VA, railroad retirement, or other burial insurance policy when the benefit is used toward the cost of burial;
- (m) money held in trust by VA for a child which VA determines may not be used for subsistence needs;
- (n) retroactive corrective assistance payments in the month received or in the following month;
- (o) income directly provided by vocational rehabilitation;
- (p) benefits from special government programs at the discretion of the secretary, including energy assistance programs and VA aid and attendance and housebound allowances;
- (q) reimbursements for out-of-pocket expenses in the month received and the following month;
- (r) proceeds from any bona fide loan requiring repayment;
- (s) payments granted to certain U.S. citizens of Japanese ancestry and resident Japanese aliens under Title I of Public Law 100-383;
- (t) payments granted to certain eligible Aleuts under Title II of Public Law 100-383;

(u) agent orange settlement payments;

- (v) for non-SSI, a one-time payment or a portion of a one-time payment from a cash settlement for the repair or replacement of property or for legal services, medical costs or other required obligations to a third party, if the payment is expended or committed to be expended for the intended purpose within six months of its receipt;
- (w) for non-SSI, assistance provided by another agency or organization that complements but does not duplicate assistance provided by the agency;

(x) for non-SSI, foster care and adoption support

payments;

(y) for SSI, a one-time payment or a portion of a one-time payment from a cash settlement for the repair or replacement of property or for legal services, medical costs or other required obligations to a third party, if the payment is expended or committed to be expended for the intended purpose within nine months of its receipt. This time period may be extended for good cause;

(z) for SSI, in kind support, vouchers, or cash assistance for food, clothing, or shelter provided by public or private organizations or agencies, if the assistance

is based on need;

(aa) for SSI, income necessary for fulfillment of an approved plan to achieve self-support established for a blind or disabled person;

(bb) for SSI, assistance furnished in connection with a presidentially declared disaster and any interest earned on the assistance for the first nine months;

(cc) for SSI, interest which is paid on excluded burial

funds and left to accumulate;

(dd) for SSI, housing assistance from federal housing programs operated by state and local subdivisions;

(ee) for SSI, any portion of any financial assistance funded under Title IV of the higher education act of 1965, as amended, or under bureau of Indian affairs student assistance programs which is made available for tuition, fees, books, supplies, transportation and miscellaneous personal supplies;

(ff) for SSI, payments occasioned by the death of another person to the extent that the payments have been expended or committed to be expended for purposes of the deceased person's last illness and burial;

(gg) for SSI, payments received from a state-administered victims' compensation fund. Such payments shall not be regarded as a cash asset for the nine

months following the month of receipt; and

- (hh) for SSI, relocation assistance provided by a state or local government which is comparable to assistance provided under Title II of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970. Such assistance shall not be regarded as a cash asset for the nine months following the month of receipt. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended May 1, 1983; amended May 1, 1984; amended May 1, 1986; amended May 1, 1987; amended, T-88-14, July 1, 1987; amended, T-88-59, Jan. 1, 1988; amended May 1, 1988; amended, T-89-13, April 26, 1988; amended Sept. 26, 1988; amended July 1, 1989; amended Oct. 1, 1989; amended Jan. 1, 1990; amended, T-30-7-2-90, July 2, 1990; revoked, T-30-8-14-90, Oct. 1, 1990; amended Oct. 1, 1990; amended May 1, 1991.)
- **30-6-113.** Income exempt as applicable income. The following income shall be exempt as applicable income in the determination of eligibility: (a) Unearned income in kind;
- (b) shelter cost participation payments. In shared living arrangements in which two families contribute toward the shelter obligations, any cash paid toward the shared shelter obligation by one family to the second family in the shared arrangement shall not be considered as income to the second family. This exemption shall not be applicable in a bona fide, commercial landlord-tenant arrangement;

(c) assistance payments in the month received;

(d) home energy assistance furnished by a federal or state regulated entity whose revenues are primarily derived on a rate-of-return basis, by a private, non-profit organization, by a supplier of home heating oil or gas, or by a municipal utility company which provides home energy, if the assistance provided is based on need;

(e) income of a child received from a youth program funded by the job training partnership act of 1982, except that earned income received under the program shall only be exempt for a period of six months;

(f) incentive payments received by renal dialysis

oatients;

(g) irregular, occasional, or unpredictable monetary gifts not to exceed \$30.00 per person in any calendar quarter, except this subsection is not applicable to gifts in excess of \$30.00;

(h) tax refunds and rebates;

(i) for non-SSI, earned income of a recipient child if the child is under the age of 18 years and a full-time student or if the child is a part-time student and is not a full-time employee;

(j) for non-SSI, earned income of a recipient child who is 18 years of age and a full-time student;

(k) for non-SSI, support payments covered by an assignment of support rights related to ADC and ADC-FC and forwarded to the agency. However, a support refund, disbursed by the agency to the client, shall not be exempt;

(1) for non-SSI, housing assistance from federal

housing programs;

(m) for non-SSI, the first \$50.00 of child support or child support in combination with spousal support received in a month;

(n) for SSI, refund of taxes paid on real property or

on food purchases;

(o) for SSI, 1/3 of child support payments received

by an eligible child from an absent parent;

- (p) for SSI, earnings of an unmarried child who is a student under 22 years of age up to \$400.00 a month. This exemption shall not exceed \$1,620.00 a year;
 - (q) for SSI, work expenses of a blind recipient;

(r) for SSI, impairment-related work expenses of a disabled recipient;

(s) for SSI, incentive allowances and reimbursements for individuals in training to provide support services under the jobs training partnership act (JTPA) program

administered by state and local subdivisions;

(t) for SSI, the difference between the social security benefit entitlement in August, 1972, and the entitlement in September, 1972, for persons who were receiving cash assistance through the programs of AABD or ADC in September, 1972 and who were entitled to a social security benefit in September, 1972. This exemption shall apply only if the exemption establishes eligibility without a spenddown;

(u) for SSI, the amount of all social security cost of living adjustments for a person who was concurrently receiving SSI and social security after April, 1977 and who would be eligible for SSI if the cost of living adjustments received since that person was last eligible

for SSI were not considered as income;

(v) for SSI, income allocated and expended by an adult in an institutional living arrangement for the support of the adult's minor children if the adult does not have a spouse who continues to live in the community. The income allocation shall not exceed the amount necessary to bring their income up to the protected income level appropriate to their living arrangement;

(w) for SSI, SSI payments to which the person is not legally entitled that are subject to SSI recovery;

(x) for SSI, child support collected by the agency and paid as a \$50.00 or less pass-through of child

support;

(y) for SSI, the amount of the December, 1983 increase in social security disabled widow or widower benefits resulting from the changes in the actuarial reduction formula and all subsequent cost of living adjustments for a person who was concurrently receiving SSI and social security disabled widow and widower benefits under section 202(e) or 202(f) of the social security act provided that:

(1) The person became ineligible for SSI due solely

to the 1983 actuarial increase;

(2) the person has continuously received social security disabled widow or widower benefits since the 1983 actuarial increase was first received;

(3) the person would be currently eligible for SSI if it were not for the 1983 actuarial increase and all subsequent cost of living adjustments; and

(4) the person applied for medical assistance under

this provision prior to July 1, 1988;

(z) for SSI, reparation payments made under the Republic of Germany's federal law for compensation of nationalist socialist persecution;

(aa) for SSI, the amount of the social security adult disabled child benefit for an otherwise eligible SSI per-

son age 18 or older who:

(1) Was receiving SSI benefits that began prior to

age 22; and

- (2) lost SSI eligibility due solely to the person becoming eligible for the adult disabled child benefits or an increase in the adult disabled child benefits;
- (bb) for SSI, the amount of social security early widow or widower benefits under section 202(e) or (f) of the social security act provided that:

(1) The person became ineligible for SSI because of

the receipt of such benefits;

(2) the person would be currently eligible for SSI in the absence of such benefits; and

- (3) the person is not entitled to hospital insurance benefits under Part A of title XVIII of the social security act:
- (cc) for SSI, the income of an SSI recipient which exceeds the protected income level for institutionalized persons for three months following the month of admission when the social security administration determines that the stay in the institution is temporary and the person needs to continue to maintain and provide for the expenses of the home or other living arrangement to which the person may return;

(dd) for SSI, the income of an applicant's or recipient's spouse or parent which was counted or excluded in determining the amount of a public assistance payment, if such spouse or parent is not an applicant for

or recipient of SSI;

(ee) for SSI, the income of an applicant's or recipient's spouse or parent which is used to make support payments under a court order or title IV-D support order, if such spouse or parent is not an applicant for or recipient of SSI; and

(ff) for SSI, the amount of VA pension received by

a single veteran with no dependents if the pension has been reduced to \$90.00 or less because the veteran resides in a medicaid-approved nursing facility; and

(gg) for SSI, foster care and adoption support payments. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c, 39-709; effective May 1, 1981; amended, E-82-19, Oct. 21, 1981; amended May 1, 1982; amended May 1, 1983; amended, T-84-11, July 1, 1983; amended, T-84-25, Sept. 19, 1983; amended May 1, 1984; amended, T-85-26, Oct. 15, 1984; amended May 1, 1985; amended May 1, 1986; amended, T-87-15, July 1, 1986; amended May 1, 1987; amended, T-88-14, July 1, 1987; amended, T-88-59, Jan. 1, 1988; amended May 1, 1988; amended, T-89-13, April 26, 1988; amended, T-30-7-1-88, July 1, 1988; amended Sept. 26, 1988; amended July 1, 1989; amended Oct. 1, 1989; amended, T-30-12-28-90, Jan. 2, 1991; amended May 1, 1991.)

Article 10.—ADULT CARE HOME PROGRAM OF THE MEDICAID (MEDICAL ASSISTANCE) PROGRAM

30-10-7. Screening, evaluation, and referral for nursing facilities. Screening, evaluation, and referral for nursing facility services for persons ineligible to participate in the medicaid/medikan program. (a) Each individual requesting screening, evaluation, and referral for admission to a nursing facility or referral to community-based services shall make application on

forms prescribed by the secretary.

- (b) The fee for the service shall be the contract rate negotiated between the agency and the performing provider. The fee shall be payable at the time the application for services is approved. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c; effective, E-74-59, Oct. 24, 1974; effective May 1, 1975; amended May 1, 1976; amended, E-78-35, Dec. 30, 1977; amended May 1, 1978; amended, E-80-13, Aug. 8, 1979; amended May 1, 1980; amended May 1, 1981; amended May 1, 1982; amended May 1, 1983; amended, T-84-11, July 1, 1983; amended May 1, 1984; amended, T-85-28, Nov. 14, 1984; amended May 1, 1985; amended May 1, 1986; amended Jan. 2, 1989; amended, T-30-10-1-90, Oct. 1, 1990; amended Jan. 30, 1991; amended May 1, 1991.)
- **30-10-29.** Reimbursement for 24-hour nursing care. Nursing facilities and nursing facilities for mental health participating in the medicaid/medikan program shall be reimbursed for providing 24-hour nursing care subject to the following limitations: (a) Each nursing facility currently providing 24-hour nursing care which has the full costs included in such homes' rate determination shall not be entitled to any further reimbursement under this regulation.

(b) Each nursing facility providing 24-hour nursing care which does not have these costs included in their homes' rates shall be reimbursed the difference in cost between a licensed nurse and a medication aide until the costs are reflected in their rates, subject to the limitations in K.A.R. 30-10-18(a). Facilities certified as

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nursing facilities for mental health may utilize a licensed mental health technician for the required licensed nurse.

- (c) Nursing facilities shall be limited to an additional 16 hours of reimbursement per facility per day for the difference in cost between a licensed nurse and a medication aide.
- (d) Twenty-four hour nursing care reimbursement shall be provided in addition to a nursing facility's current medicaid/medikan rate until the costs are included in the rate. Facilities certified as nursing facilities for mental health may utilize a licensed mental health technician for the required licensed nurse. Providers shall submit documentation and receive the 24hour nursing pass-through reimbursement only one time. If a provider had the pass-through reimbursement in its rate and later is determined to be out of compliance with the 24-hour nursing requirements, the

provider shall not be eligible for the 24-hour nursing pass-through reimbursement provision. The effective date of this regulation shall be May 1, 1991. (Authorized by and implementing K.S.A. 1990 Supp. 39-708c; effective, T-86-42, Dec. 18, 1985; effective, T-87-5, May 1, 1986; effective May 1, 1987; amended May 1, 1988; amended Jan. 2, 1990; amended, T-30-10-1-90, Oct. 1, 1990; amended Jan. 30, 1991; amended May 1, 1991.)

30-10-30. This rule and regulation shall expire on May 1, 1991. (Authorized by K.S.A. 39-708c; implementing 1989 HB 2028; effective Jan. 2, 1990; revoked May 1, 1991.)

> Robert S. Harder Acting Secretary of Social and Rehabilitation Services

Doc. No. 010340

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